

PROVIDER QUICK POINTS

PROVIDER INFORMATION



April 24, 2024

Updated Request Form for Medical Policy Coverage Exception Requests

As communicated in Provider Quick Point QP12-23 published on 2/22/2023, Blue Cross and Blue Shield of Minnesota (Blue Cross) no longer conducts medical necessity reviews of services that do not require prior authorization, including services deemed experimental or investigational as defined in Blue Cross medical policies. Requests for prior authorization in these instances will be closed and returned with a message that no prior authorization is required.

Blue Cross's *Medical Policy Coverage Exception Request Form* has been updated to include requests for services that are always experimental or investigative per Blue Cross Medical Policies. This form can be used by providers to request a review when extenuating circumstances are believed to be present.

Medical Policy Coverage Exception Request Process

If a coverage exception request is needed, providers can complete the following steps:

1. Prior to submitting a medical policy coverage exception request:
 - **Verify the member's eligibility and benefits.** Make sure the member has active coverage with this plan and has benefit coverage for the service you are requesting.
 - **Review the medical policy** for the requested services, if applicable, by using our [medical policy search](#) page. Additional resources related to clinical criteria used are available at bluecrossmn.com/providers/medical-policy-and-utilization-management under *Medical Policy*.
 - **Check if prior authorization is required.** If required, submit a prior authorization instead of using the medical policy coverage exception request process.
 - Current and future PA requirements can be found using the *Is Authorization Required* tool in the Availity® portal or on the bluecrossmn.com website. Providers outside of Minnesota can access Availity through the out-of-area member router provided by each state's plan.
2. Complete a *Medical Policy Coverage Exception Request* form [Medical Policy Coverage Exception form \(bluecrossmn.com\)](#) and submit it to the fax number indicated on the form along with pertinent clinical records that support the exception request.
 - A Blue Cross representative may contact you to discuss the case and the reason for the coverage exception request. Please provide a good contact phone number.

QP36-24

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L264R03 (12/13)

Note: Please DO NOT use the Medical Policy Coverage Exception Request form for:

- **Urgent requests.** Requests for medical policy coverage exceptions follow the standard review timeline. Please do not delay urgently needed care if the standard review time may seriously jeopardize the life or health of the member or the member's ability to regain maximum function. Claims for these services will process through the claims system according to the member's benefits and can be appealed if the claim is denied based on the medical policy coverage criteria.
- **Members with Medicare products or Federal Employee Plan members.** Requests for medical policy coverage exceptions for these members should be submitted following the prior authorization request process.

Products Impacted

This information applies only to subscribers who have Commercial and Medicaid coverage.

Questions?

Please contact Provider Services at **651-662-5200** or **1-800-262-0820**.