



Blue Care
Network
of Michigan

Understanding BCN prior authorizations

HMO

EDUCATE

ENGAGE

EMPOWER



Your doctor may have recommended certain health care services or prescription drugs and then told you that your health care plan needs to authorize the service. Why is there an authorization step?

What's a prior authorization?

A prior authorization is special approval from us for certain in-network health care services and prescription drugs or to see specialists who aren't part of your plan's network.

Why do some services need prior authorization?

In some cases, we require the authorization step to make sure the prescription drugs, medical tests, surgeries and other health care services being requested are appropriate for your condition and are medically necessary. Your plan may also have requirements about where to get certain services. If your health care provider doesn't get a prior authorization, the service may not be covered. That's why it's always a good idea to check if an authorization is needed before receiving any health care services.

Who's responsible for submitting a prior authorization?

Your health care provider is responsible for requesting an authorization and for providing all the documents needed. Once we get the request, we'll begin the review process.

What services need a prior authorization?

Here are some health care services that need approval. **This isn't the full list, so remember to check with your doctor to see if there are prior authorization requirements before you receive any health care services.**

- Applied behavior analysis for autism
- Breast reduction
- Cosmetic procedures, such as removing scars or excess tissue from your eyes or abdomen
- Diabetic supplies
- Durable medical equipment, such as a hospital bed or wheelchair
- Experimental procedures
- Gender reassignment surgery
- Genetic testing
- Infertility services
- Inpatient care
- Investigational procedures
- Joint replacement surgeries
- Knee arthroscopies
- Mental health or substance use disorders: Inpatient hospitalizations, intensive outpatient services, partial hospitalization services and treatment in a freestanding substance use disorders facility
- Neurofeedback for treating attention deficit hyperactivity disorder
- Outpatient electroconvulsive therapy, or ECT
- Orthotic supplies, such as a knee brace
- Physical, speech and occupational therapy
- Prosthetics, such as an artificial limb
- Repetitive transcranial magnetic stimulation, or rTMS
- Services from out-of-network doctors or health care professionals
- Skilled nursing facility care
- Sleep studies in a center or a facility
- Some of the following:
 - Cardiology procedures
 - Radiation therapy procedures
 - Spine injections to manage pain
 - Radiology services
- Transplant services, including those for organ, bone marrow and stem cell transplants
- Weight-reduction procedures

What if my prior authorization request is denied?

If the authorization request your doctor submits is denied, you have the right to appeal the decision. You'll receive a letter that says your request was denied and the reason, plus information that explains how you can appeal.