

For physician offices

The latest COVID-19 provider information

Testing code added to in-office billable list for BCN, BCN Advantage and Medicare Plus Blue



Read more:

- Jan. 6 Provider Alert

Sequestration suspension extended through March 31, 2022



Read more:

- Jan. 6 Provider Alert

Temporary suspension of clinical review requirements

Read more:

- Jan. 6 Provider Alert

Telehealth services require place of service code 10 beginning Feb. 1

Read more:

- Dec. 17 Provider Alert
- February 2022 issue of *The Record*

Bill Medicare Advantage plans for COVID-19 vaccines, monoclonal antibody products and administration



Read more:

- Dec. 17 Provider Alert

Additional COVID-19 provider communications can be found here:

- *Coronavirus (COVID-19) information updates for providers* webpage located within *BCBSM Newsletters and Resources* or *BCN Provider Publications and Resources* on web-DENIS

- bcbsm.com/coronavirus

Click on *Health Care Providers*

New and updated preview questionnaires and medical necessity criteria for the prior authorization program expansion



In preparation for the upcoming expansion of the prior authorization program for Medicare Plus BlueSM, BCN commercial and BCN AdvantageSM members, we've added and updated preview questionnaires, authorization criteria and medical policies. These documents apply to authorization requests submitted for dates of service on or after Jan. 1, 2022. Read more: [December 2021 news item on \[ereferrals.bcbsm.com\]\(https://ereferrals.bcbsm.com\)](#)

Gastric stimulation, varicose vein questionnaires updated in e-referral system







On Dec. 19, 2021, we updated the *Gastric stimulation* and *Varicose vein treatment* questionnaires in our e-referral system. Read more: February 2022 issue of *The Record*

Advantages of using the e-referral system instead of calling or faxing for prior authorization requests

Using the e-referral system is the most efficient way to submit a prior authorization request for services managed by the Blue Cross Blue Shield of Michigan and Blue Care Network Utilization Management departments. It's also the easiest way to check the status of a request you've submitted. Learn more about the benefits of submitting or checking the status of a request via e-referral in the February 2022 issue of *The Record*.

Continued on the next page

Articles apply to all lines of business unless noted by the icons below:

Key:  Blue Care Network commercial  Blue Cross commercial  BCN AdvantageSM  Medicare Plus BlueSM

For physician offices

Continued from front page

Changes to musculoskeletal procedure codes that require authorization through TurningPoint

We've updated the *Musculoskeletal procedure codes that require authorization by TurningPoint* list to reflect procedure code changes that will no longer require authorization (for dates of service on or after Jan. 1, 2022), and additional procedure codes that will require prior authorization (for dates of service on or after March 27, 2022). Read more: [February 2022 issue of *The Record*](#)

HEDIS medical record reviews begin in February

Each year from February through May, Blue Cross and BCN conduct Healthcare Effectiveness Data and Information Set®, or HEDIS®, medical record reviews for members who live in Michigan. This year, Blue Cross' HEDIS clinical consultants will conduct HEDIS reviews for services rendered in 2021 for members with Blue Cross commercial, BCN commercial, Medicare Plus Blue, BCN Advantage and individual products. Read more: [February 2022 issue of *The Record*](#)

HEDIS 2021 results

HEDIS is the most widely used set of performance measures in the managed care industry and is used by the National Committee for Quality Assurance for accreditation. Despite continued challenges related to COVID-19 and the Delta variant, HEDIS performance remains strong. BCN noted several areas of improvement in 2021 (measurement year 2020) across all lines of business. Read more: [Page 13 of the January–February 2022 *BCN Provider News*](#)

*HEDIS, which stands for Healthcare Effectiveness Data and Information Set, is a registered trademark of the National Committee for Quality Assurance.

2022 transplant benefit changes for FEP members

Effective Jan. 1, 2022, kidney transplants for Standard and Basic Option Federal Employee Program® members require prior authorization and are part of the Blue Distinction® Center for Transplants program. Pancreas transplants are no longer part of the BDCT program but prior authorization is still required. Read more: [February 2022 issue of *The Record*](#)

Training updates

Availity training opportunities

Read more:

- [Page 3 of the January–February 2022 *BCN Provider News*](#)
- [February 2022 issue of *The Record*](#)

New on-demand training available

Read more:

- [Page 7 of the January–February 2022 *BCN Provider News*](#)
- [February 2022 issue of *The Record*](#)

Rx updates

Ryplazim requires prior authorization for Medicare Advantage members

Read more: [February 2022 issue of *The Record*](#)





Changes coming to preferred products for pegfilgrastim for commercial and Medicare Advantage members, starting April 1

Read more: [February 2022 issue of *The Record*](#)

Drugs to require prior authorization for Blue Cross URMPT non-Medicare members, starting March 10

Read more: [February 2022 issue of *The Record*](#)

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