Autumn 2023

Blues Brief



For hospitals and facilities

For commercial LTACH requests, HMO PPO submit information about three SNFs to avoid delays

As a reminder, for prior authorization requests for admissions to long-term acute care hospitals, or LTACHs, you are required to include information about three skilled nursing facilities, or SNFs, you have contacted. These must be SNFs that you believe may be able to provide care for the member but have indicated they can't provide the level of care the member requires. Read more:

- Page 34 of the September–October 2023 **BCN Provider News**
- September 2023 issue of The Record

Blue Cross and BCN behavioral health changes coming Jan. 1, 2024

Starting Jan. 1, 2024, Blue Cross Blue Shield of Michigan and Blue Care Network will consolidate the prior authorization and case management functions for behavioral health services, including treatment for autism. Read more:

- Page 1 of the September–October 2023 **BCN Provider News**
- September 2023 issue of The Record

Starting Jan. 1, all DME codes will be removed from **CareCentrix HIT and AIS program**

For dates of service on or after Jan. 1, 2024, durable medical equipment codes will be removed from the CareCentrix network management program for home infusion therapy and ambulatory infusion suite providers. Read more:

- Page 25 of the September–October 2023 **BCN Provider News**
- September 2023 issue of The Record

Providers can upload some medical records through **Availity Essentials**

Health care providers can now upload requested medical records through Availity® Essentials for Blue Cross commercial members when requested through the Medical Record Request Form. Read more: September 2023 issue of The Record

Availity[®] is an independent company that contracts with Blue Cross Blue Shield of Michigan and Blue Care Network to offer provider portal and electronic data interchange services.

Changes for in-lab sleep MA PA studies start Oct. 9

Prior authorization requirements for in-lab sleep studies will change for dates of service on or after Oct. 9, 2023. Read more:

- Page 32 of the September–October 2023 **BCN** Provider News
- August 2023 issue of The Record

New Change of Ownership for Home Health Care or Skilled Nursing Facilities helpful hints flyer available

We've compiled a list of tips and hints for the required paperwork needed when there is a change in ownership for Home Health Care facilities and Skilled Nursing Facilities. Read more: Sept. 14, 2023, provider alert

Holiday office closings

Blue Cross and BCN offices will be closed Nov. 23 to 24 (Thanksgiving).

Continued on the next page

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

Key: HMO Blue Care Network commercial PPO Blue Cross commercial HMO BCN AdvantageSM PPO

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Blues Brief



For hospitals and facilities

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- Page 4 of the September–October 2023 BCN Provider News
- September 2023 issue of The Record

We're adding more codes to multiple procedure reduction payment policy

Starting in December, Blue Cross Blue Shield of Michigan will add additional procedure codes to a payment policy that applies a 50% reduction when multiple procedures are performed during the same session. Read more: **September 2023 issue of** *The Record*

Use new mailing address for provider appeals of some utilization management decisions

The mailing address for submitting provider appeals of some utilization management decisions has changed. Read more:

- Page 36 of the September–October 2023 BCN Provider News
- September 2023 issue of The Record

We're making changes to payment policy for debridement procedures billed with arthroscopic

procedures

Beginning in December, Blue Cross Blue Shield of Michigan's payment policy will no longer allow separate and distinct modifiers to bypass bundling claim edits when shoulder debridement procedures are billed with arthroscopic shoulder procedures. Read more: September 2023 issue of The Record

Cost of external peer reviews increases

The cost of external peer reviews for facilities (including hospitals) and doctors' offices have increased, effective Sept. 1, 2023. Providers will need to pay the cost of appeal reviews if the peer review agency upholds Blue Cross' decision regarding a claim. Read more: **September 2023 issue of** *The Record*

Reminder: Appeals shouldn't be submitted for certain clinical edits on Medicare Plus Blue claims

Many clinical edits that apply to Medicare Plus Blue claims shouldn't be appealed. Health care providers should simply submit corrected claims for reconsideration. Read more: **September 2023 issue** of *The Record*

Medicare Plus BluesM

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