

Some pre-COVID-19 utilization management requirements to resume July 1

With the end of the COVID-19 public health emergency, or PHE, Blue Cross Blue Shield of Michigan and Blue Care Network will reinstate utilization management requirements that were in effect before the PHE.

Keep reading to find out what changes will occur and when they will go into effect.

| Topic | During the PHE | Change |
|--|---|---|
| For BCN Advantage members, services from providers who are not associated with the member's plan | Prior authorization requests were approved without clinical review. | Clinical review will be required for dates of service on or after July 1, 2023. |
| For all members, acute medical inpatient admissions related to COVID-19, flu, pneumonia or respiratory syncytial virus (RSV) | Prior authorization requests were approved without clinical review. | Clinical review will be required for admissions on or after July 1, 2023. |
| Appeal of prior authorization determinations made by Blue Cross or BCN for any service | The time frames for submitting appeals were waived. | The normal time frames for submitting appeals will be reinstated starting July 1, 2023. Refer to the denial letters for the time frames. |