

CARE MANAGEMENT AND UTILIZATION MANAGEMENT



Blue Cross Blue Shield of Michigan and Blue Care Network offer care management programs and support services to members. We also provide utilization management programs.

These programs vary based on member coverage and may be administered by Blue Cross or BCN staff or by contracted vendors.

- **Care management** programs provide patient support by identifying patients with health risks and working with them to improve or maintain their health, and **support services** provide support to members through their health journeys.
- **Utilization management** programs focus on ensuring that patients get the right care at the right time in the right location through the prior authorization process.

These services are provided by the departments and vendors listed below.

Care management and support services

- [Blue Cross and BCN — case management](#)
- [Blue Cross and BCN — crisis services](#)
- [Mental Health Self-Guided Support \(formerly myStrength\)](#)

Utilization management

- [Blue Cross Behavioral HealthSM](#)

The Quartet Care Navigation Platform can help increase the speed with which adult members can access behavioral health services. For more information, see [our provider FAQ](#).

Keep reading to learn which members have access to or requirements under these programs. Programs may not apply to all members.

This document is subject to change. Access this document via ereferrals.bcbsm.com to ensure you're viewing the most up-to-date information.

CARE MANAGEMENT AND SUPPORT SERVICES

Blue Cross and BCN — case management

Behavioral health case management services help patients to access appropriate treatment and community resources. Through this phone-based service, case managers assist patients to meet goals related to improving their health by:

- Coordinating their health care services
- Assessing their needs and helping to establish goals
- Connecting them with providers, support systems and community resources
- As needed, monitoring their progress on goals and addressing barriers to care

This no-cost service is available to the following groups and individual members:

- Blue Cross commercial — All fully insured groups, select self-funded groups and all members with individual coverage

Exceptions: Blue Cross commercial self-funded groups whose behavioral health benefits aren't managed by Blue Cross Behavioral HealthSM aren't eligible for this service. See the [Mental Health and Substance Use Disorder Carve-Out List](#) PDF.

- Medicare Plus BlueSM — All groups and members with individual coverage
- BCN commercial — All fully insured groups, most self-funded groups and all members with individual coverage

Exception: Members with [Healthy Blue Choices POS](#) plans

- BCN AdvantageSM — All groups and all members with individual coverage

To learn more about this service, members can call the number on the backs of their ID cards.

Resources

Members can find additional resources:

- At bcbsm.com/behavioral-mental-health
- Through their BCBSM member accounts, on the Live and Work Well site

Exceptions: Members who have coverage through the Blue Cross and Blue Shield Federal Employee Plan[®] or through MESSA have access to resources through their FEP or MESSA account.

CARE MANAGEMENT AND SUPPORT SERVICES

Blue Cross and BCN — crisis services

As part of our crisis services program, pediatric and adult members¹ have the following options for receiving help if they're having a mental health or substance use disorder crisis:

- Psychiatric urgent care
- Mobile crisis services
- Onsite crisis stabilization services
- Residential crisis treatment

Several facilities in Michigan offer these services as part of this program. See the [Behavioral Health Crisis Care](#) page on [bcbsm.com](#) for the locations, phone numbers, service areas and care options available at each location.

Psychiatric urgent care facilities — Help members to avoid higher levels of care. Services are available seven days per week, including evening hours. Services include:

- Immediate assessment and treatment for acute psychiatric symptoms
- Medication, support and referrals to outpatient treatment for follow-up.

Mobile crisis services — Offer community-based interventions to members in need, regardless of their physical location. Mobile crisis services teams:

- Complete face-to-face, telemedicine or phone evaluations to assess the member's needs, reduce symptoms and begin support
- Complete individualized treatment plans within 96 hours of service to connect members to the correct and least restrictive level of after-care treatment

The mobile crisis team may stay involved for two to four weeks after the initial encounter to ensure members are connected to the right level of care and to provide treatment as necessary.

Onsite crisis stabilization services — Units are open 24/7 and provide intervention services for members. Members can be referred by a mobile crisis services team, law enforcement or other community-based services. Members may also walk in.

Services are focused on caring for members in a mental health crisis whose needs can't be met safely in other settings. Members often receive treatment for less than 24 hours.

Services include:

- Behavioral health evaluation to initiate appropriate treatment (similar to medical observation services)
- Physical site-based services to support the mobile crisis team. This includes:
 - Intake assessments, psychiatric evaluations, crisis interventions and initiation of treatment, such as psychotherapy, medication administration, therapeutic injection, observation and peer support
 - Initiating coordinated linkages and “warm handoffs” to the appropriate level of care and community resources

Facilities for physical site-based services provide members with access to services from a multidisciplinary staff, including physicians, registered nurses, licensed master social workers, psychologists, clinical supervisors and additional support staff. As part of the evaluation and treatment process, some members may still need psychiatric hospitalization.

(Continued on next page)

CARE MANAGEMENT AND SUPPORT SERVICES

(continued from previous page)

Crisis residential services — Programs are designed for short-term stays (an average of seven days) to support members who are ready to participate in recovery. Multidisciplinary staff, including physical and medical health physicians, help patients stabilize, resolve problems and connect with potential sources of ongoing support. Services include:

- Individual, group and family therapy
- Therapeutic activities
- Psychiatric evaluation
- Medication administration
- Peer support

Program availability

This program is available to the following members:

- Blue Cross commercial — All fully insured groups, all self-funded groups* and all members with individual coverage

Exceptions: Blue Cross commercial self-funded groups whose behavioral health benefits aren't managed by Blue Cross Behavioral Health aren't eligible for this service. See the [Mental Health and Substance Use Disorder Carve-Out List](#) PDF.

- Medicare Plus Blue — All groups and all members with individual coverage
- BCN commercial — All fully insured groups, most self-funded groups* and all members with individual coverage
- Exception: Members with [Healthy Blue Choices POS](#) plans
- BCN Advantage — All groups and all members with individual coverage

Resources

- [Clinical program requirements for behavioral health crisis services](#) (PDF)
- [Behavioral Health Crisis Care](#) page on [bcbsm.com](#)

¹Some health care providers provide services only for adult members.

CARE MANAGEMENT AND SUPPORT SERVICES

Mental Health Self-Guided Support (formerly myStrength)

With more than 1,600 activities covering more than 30 life topics, Mental Health Self-Guided Support provides members with virtual self-help content focused on these core areas: depression, anxiety, sleep, substance use disorders, chronic pain, opioid/medication-assisted treatment, stress, mindfulness, balancing emotions, pregnancy and early parenting, nicotine and trauma. Blue Cross and BCN work with Teladoc Health® to offer this program.

Mental Health Self-Guided Support provides these services for the following groups and individual members:

- Blue Cross commercial — All fully insured groups, select self-funded groups* and all members with individual coverage
- Medicare Plus BlueSM — All groups and all members with individual coverage
- BCN commercial — All fully insured groups, select self-funded groups* and all members with individual coverage
- BCN AdvantageSM — All groups and all members with individual coverage

Resources

teladochealth.com**

UTILIZATION MANAGEMENT

Blue Cross Behavioral HealthSM

Makes prior authorization determinations for the following services:

Line of business	Services
<p>Blue Cross commercial — All fully insured groups, select self-funded groups* and all members with individual coverage</p> <p>For exceptions, see the Mental Health and Substance Use Disorder Carve-Out List PDF</p>	<ul style="list-style-type: none"> • Outpatient autism services (applied behavior analysis) • Outpatient transcranial magnetic stimulation • Inpatient, residential or partial hospital programs • Inpatient subacute detox
<p>Medicare Plus Blue — All groups and all members with individual coverage</p>	<ul style="list-style-type: none"> • Outpatient autism services (ABA) • Inpatient or partial hospital programs • Inpatient subacute detox
<ul style="list-style-type: none"> • BCN commercial — All fully insured groups, select self-funded groups* and all members with individual coverage <p>Exception: Members with Healthy Blue Choices POS plans</p> <ul style="list-style-type: none"> • BCN Advantage — All groups and all members with individual coverage 	<ul style="list-style-type: none"> • Outpatient autism services (ABA) • Outpatient TMS • Inpatient or partial hospital programs • Residential programs (BCN commercial only) • Inpatient subacute detox

Resources

[Blue Cross Behavioral Health: Frequently asked questions for providers](#) (PDF)

Blue Cross commercial

- These pages on ereferrals.bcbsm.com:
 - [Blue Cross Autism Services](#)
 - [Blue Cross Behavioral Health](#)
- These chapters of the Blue Cross Commercial Provider Manual:
 - Psychiatric Care Services chapter — “Autism spectrum disorder” section and “Prior authorization” sections
 - Substance Use Disorder Treatment Services chapter

Medicare Plus Blue

- These pages on ereferrals.bcbsm.com:
 - [Blue Cross Autism Services](#)
 - [Blue Cross Behavioral Health](#)
- In the Utilization Management section of the [Medicare Plus Blue PPO Provider Manual](#), look for the subsection titled “Prior authorization of behavioral health services”

BCN commercial and BCN Advantage

- These pages on ereferrals.bcbsm.com:
 - [BCN Autism Services](#)
 - [BCN Behavioral Health](#)
- [Behavioral Health](#) chapter of the *BCN Provider Manual*

ADDITIONAL INFORMATION

About this document

This document lists coverage exceptions for major groups.

It also refers to additional resources. For resources that are publicly available, we provide direct links. To access documents that aren't publicly available:

1. Log in to our provider portal (availity.com**).
2. Click *Payer Spaces* on the Availity menu bar and then click the BCBSM and BCN logo.
3. Click the *Resources* tab.
4. Click *Secure Provider Resources (Blue Cross and BCN)*.

Information for out-of-state providers

See the following documents for referral and authorization requirements.

- For Blue Cross commercial and Medicare Plus Blue members: [Provider preauthorization and precertification requirements](#) PDF
- For BCN commercial and BCN Advantage members: [Non-Michigan providers: BCN referral and authorization requirements](#) PDF

You can view these documents and our medical policies through the [Medical Policy & Pre-Cert/Pre-Auth Router](#). To access the router, go to bcbsm.com/providers, click *Resources*, scroll to the “Out-of-area prior authorization resources” section and click the *out-of-area router* link.

Reminder

As always, it's essential that providers check each member's eligibility and benefits prior to performing services.

Providers are responsible for identifying the need for prior authorization through our provider portal, Benefit Explainer or Provider Inquiry and for obtaining prior authorization for services, as needed.

*For self-funded plans, the employer assumes the risk for claims costs and pays a fee for administrative services provided by Blue Cross or BCN.

**Clicking this link means that you're leaving the Blue Cross Blue Shield of Michigan and Blue Care Network website. While we recommend this site, we're not responsible for its content.

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

Teladoc Health is an independent company that provides select care management services for Blue Cross Blue Shield of Michigan and Blue Care Network.

Quartet is an independent company contracted by Blue Cross Blue Shield of Michigan to connect Blue Cross and BCN members seeking outpatient behavioral health services with the appropriate behavioral health providers.