

UTILIZATION MANAGEMENT



Blue Cross Blue Shield of Michigan and Blue Care Network 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.

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 programs are provided by the departments and vendors listed below.

Utilization management

- [BCN Utilization Management department](#)
- [Carelon Medical Benefits Management \(formerly AIM Specialty Health®\)](#)

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.

UTILIZATION MANAGEMENT

BCN Utilization Management department

Makes prior authorization determinations for sleep studies as follows.

Home sleep studies

- For all BCN commercial members, submit prior authorization requests to notify the plan. Although these requests don't require clinical review, you must submit a prior authorization request to facilitate claims payment.
- For all BCN AdvantageSM members, prior authorization is required only when the provider is out of network with the member's plan.

In-lab sleep studies

- For all **pediatric** BCN commercial members (17 years of age or younger), submit prior authorization requests to notify the plan. Although these requests don't require clinical review, you must submit a prior authorization request to facilitate claims payment.
- For all BCN Advantage members, prior authorization is required only when the provider is out of network with the member's plan.

Resources

- [BCN Sleep Studies](#) page on ereferrals.bcbsm.com

UTILIZATION MANAGEMENT

Carelon Medical Benefits Management (formerly AIM Specialty Health®)

Makes authorization determinations for in-lab sleep studies that are performed in freestanding diagnostic facilities, outpatient hospital settings, ambulatory surgery centers or physician offices.

Carelon makes these determinations for the following groups and products:

- Blue Cross commercial
 - All fully insured groups
 - Most self-funded groups

Exceptions: UAW Retiree Healthcare Trust (group 70605), UAW International Union (group 71714), Blue Cross and Blue Shield Federal Employee Program®, State of Michigan plans and select Ascension Health groups

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

Resources

- [Procedures that require authorization by Carelon](#)
- [Blue Cross Carelon-Managed Procedures](#) page on ereferrals.bcbsm.com

- [Carelon's Clinical guidelines and pathways](#) webpage**

For Blue Cross commercial

- The following chapters and sections of the *Blue Cross Commercial Provider Manual*:
 - Medical-Surgical Services chapter — See the section titled “Polysomnography and other sleep testing”
 - Hospital Services chapter — See the section titled “Polysomnography and other sleep testing”
 - PPO Policies chapter

For BCN commercial

[BCN Sleep Management Program](#) page on ereferrals.bcbsm.com

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, including provider manual chapters:

1. Log in to our provider portal (availity.com**).
2. Click *Payer Spaces* on the 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](#)
- For BCN commercial and BCN Advantage members: [Non-Michigan providers: BCN referral and authorization requirements](#)

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 *Quick Links*, 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.

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.

Carelon Medical Benefits Management is an independent company that contracts with Blue Cross Blue Shield of Michigan and Blue Care Network to manage authorizations for select services. For more information, go to our ereferrals.bcbsm.com website.

*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.

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