

UTILIZATION MANAGEMENT



BCN provides utilization management services.

Utilization management focuses on ensuring that patients get the right care at the right time in the right location through the authorization process.

These services are provided by the vendor listed below.

Utilization management

[Joint Venture Hospital Laboratories](#)



Nonprofit corporations and independent licensees
of the Blue Cross and Blue Shield Association

Laboratory

For genetic testing and molecular testing

March 2021

UTILIZATION MANAGEMENT

Joint Venture Hospital Laboratories

Makes authorization determinations for outpatient genetic and molecular testing.

JVHL provides these services to the following groups and individual members:

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

Resources

- jvh.org**
- The [BCN Referral and Authorization Requirements](#) document
- The [Utilization Management](#) chapter of the *BCN Provider Manual*

ADDITIONAL INFORMATION

About this document

This document lists coverage exceptions for major groups.

It also provides links to additional resources, some of which may be in provider manuals that aren't publicly available.

- To access chapters of the *Blue Cross PPO Provider Manual*, log in as a provider at bcbsm.com, click the *Provider Manuals* link on the right and then click the *Blue Cross PPO Provider Manual* link.
- To access chapters of the *BCN Provider Manual*, log in as a provider at bcbsm.com, click the *Provider Manuals* link on the right and then click the *BCN Provider Manual* link.

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: 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 *Out-of-state providers* and then click *Medical policy, precertification and preauthorization router*.

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 authorization through web-DENIS, Benefit Explainer or Provider Inquiry and for contacting vendors and obtaining 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.

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