

Preview questionnaire:

Radiofrequency ablation

For BCN HMOSM (commercial) and BCN AdvantageSM members

Effective July 1, 2020

Radiofrequency ablation

We provide coverage for this procedure for adult members who meet medical necessity criteria.

- For dates of service **on or after Jan. 1, 2021**, submit authorization requests to TurningPoint Healthcare Solutions, LLC. You can submit authorization requests to TurningPoint starting on Dec. 1, 2020. See the <u>BCN Musculoskeletal Services page</u> of the ereferrals.bcbsm.com website for more information.
- For dates of service **before Jan. 1, 2021**, submit authorization requests through the e-referral system. The submitter will receive a prompt to complete a questionnaire to determine the appropriateness of the requested service. The questions are listed below. If all questions are answered, e-referral will either approve or pend the case. If the case pends and we cannot authorize it, we will contact the provider for additional clinical information.

Authorization is not a guarantee of payment. Payment is based on established claim edits. We will retrospectively monitor compliance with this authorization requirement.

Applicable procedure codes: *64640

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See below for the questions you'll encounter in the e-referral system.

	est for radiofrequency ablation of peripheral nerves to treat the patient's pain (including but not limited to plantar fasciitis, occipital cervicogenic headache and osteoarthritis)? Possible answers: Yes No
O Is the request for Coolief Cooled radiofrequency ablation to treat the patient's pain? Possible answers: □ Yes □ No	



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O Is the reque	est for a genicular nerve block to treat the patient's chronic knee pain?
	Possible answers: ☐ Yes ☐ No