

CARE MANAGEMENT AND UTILIZATION MANAGEMENT



Blue Cross and BCN offer care management to members. We also offer utilization management services.

- **Care management** provides patient support by identifying patients with health risks and working with them to improve or maintain their health.
- **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 departments and vendors listed below.

Care management

- [AMC Health](#)

Utilization management

- [BCN Utilization Management](#)
- [AIM Specialty Health® — For cardiology procedures](#)
- [AIM Specialty Health — For echocardiology procedures](#)



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

Cardiology

*For biometric home monitoring and
for procedures and services that require prior authorization*

April 2021

CARE MANAGEMENT

AMC Health

Provides home biometric monitoring for blood pressure, weight, oxygen saturation, glucose and temperature using remote monitoring technology for members with one or more of the following conditions: congestive heart failure, chronic obstructive pulmonary disease or comorbidities.

AMC Health provides these services for the following groups and individual members:

- Medicare Plus BlueSM — Most groups and all members with individual coverage
- BCN AdvantageSM — Most groups and all members with individual coverage

Resources

[amchealth.com](https://www.amchealth.com)**

UTILIZATION MANAGEMENT

BCN Utilization Management

Makes authorization determinations for various cardiology services for the following groups and individual members:

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

Resources

For BCN commercial

- See the [BCN referral and authorization requirements for Michigan providers](#) document.
- See the “Authorization criteria and preview questionnaires” section of the [BCN Authorization Requirements & Criteria](#) page on our [ereferrals.bcbsm.com](#) website.
- See the [Utilization Management](#) chapter of the BCN Provider Manual.
- See our medical policies, which you can access through the [Medical Policy & Pre-Cert/Pre-Auth Router Home](#) page of the [bcbsm.com](#) website. To locate a medical policy, enter the procedure code in the *Policy/Topic Keyword* field and press ENTER. (You don’t need to choose a category.)

For BCN Advantage

- See the [BCN referral and authorization requirements for Michigan providers](#) document.
- See the “Authorization criteria and preview questionnaires” section of the [BCN Authorization Requirements & Criteria](#) page on our [ereferrals.bcbsm.com](#) website.
- See the [Utilization Management](#) chapter of the *BCN Provider Manual*.
- See the “BCN Advantage utilization management program” section of the [BCN Advantage](#) chapter in the *BCN Provider Manual*.
- For Medicare Advantage members, we apply the Medicare national coverage determinations (if available) or Medicare local coverage determinations (in the absence of national coverage determinations). If there is no Medicare national or local coverage determination, use our medical policies.

Note: The “Government regulations” sections of our medical policies include the Medicare coverage determinations that were in effect when the policies were last reviewed. You can access the policies through the [Medical Policy & Pre-Cert/Pre-Auth Router Home](#) page of the [bcbsm.com](#) website. To locate a medical policy, enter the procedure code in the *Policy/Topic Keyword* field and press ENTER. (You don’t need to choose a category.)

UTILIZATION MANAGEMENT

AIM Specialty Health® — For cardiology procedures

Makes authorization determinations for the following groups and individual members:

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

Resources

- aimspecialtyhealth.com/solutions/health-plans/clinical-solutions/cardiology/**
- [Frequently asked questions about AIM for cardiology, radiology \(high technology\) and sleep studies \(in lab\)](#)

For Medicare Plus Blue members:

- In the Utilization Management section of the [Medicare Plus Blue PPO Manual](#), look for the subsection titled “Preauthorization of high-technology radiology and cardiology services”
- In the [Preauthorization and Utilization Management](#) page of the Medicare Plus Blue Provider Toolkit page on the bcbsm.com website, look for section titled “Preauthorization for the AIM Radiology Management Program”

- See the Blue Cross’ [AIM-managed procedures](#) page on our ereferrals.bcbsm.com website

For BCN commercial and BCN Advantage members:

- See BCN’s [AIM-managed procedures](#) page on our ereferrals.bcbsm.com website
- See the [Utilization Management chapter](#) of the *BCN Provider Manual*

UTILIZATION MANAGEMENT

AIM Specialty Health — For echocardiology procedures

Makes authorization determinations for the following groups and individual members:

- Blue Cross commercial
 - Fully insured groups — For all groups except the Blue Cross and Blue Shield Federal Employee Program®, State of Michigan plans, Dart Container of Michigan and select Ascension Health groups.
 - Self-funded groups* — For all groups except UAW Retiree Medical Benefits Trust, Blue Cross and Blue Shield FEP, State of Michigan plans, Dart Container of Michigan and select Ascension Health groups.
 - Members with individual coverage
- Medicare Plus Blue — All groups and all members with individual coverage
- BCN commercial — All fully insured groups, all self-funded groups* and all members with individual coverage
- BCN Advantage — All groups and all members with individual coverage

Resources

- aimspecialtyhealth.com/solutions/health-plans/clinical-solutions/cardiology/**

- [Frequently asked questions about AIM for cardiology, radiology \(high technology\) and sleep studies \(in lab\)](#)

For Blue Cross commercial members

- See the following areas of the *Blue Cross PPO Provider Manual*:
 - The “AIM Specialty Health” section of the Blue Pages Directory chapter
 - The Preapproval of Services chapter
 - The Radiology Management Program Procedure Codes chapter
- See the Blue Cross’ [AIM-managed procedures](#) page on ereferrals.bcbsm.com website.

For Medicare Plus Blue members

- For a list of procedure codes that require authorization, see the [AIM Radiology Management Program](#) document on our bcbsm.com website.
- In the Utilization Management section of the [Medicare Plus Blue PPO Manual](#), look for the subsection titled “Preauthorization of high-technology radiology and cardiology services.”
- In the [Preauthorization and Utilization Management](#) page of the Medicare Plus Blue Provider Toolkit page on bcbsm.com website, look for section titled “Preauthorization for the AIM Radiology Management Program.”

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- See the Blue Cross' [AIM-managed procedures](#) page on ereferrals.bcbsm.com website.

For BCN commercial and BCN Advantage members

- For a list of procedure codes that require authorization, see the [AIM Radiology Management Program](#) document on our bcbsm.com website.
- See the BCN [AIM-managed procedures](#) page on ereferrals.bcbsm.com website.

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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