

Provider resource guide at a glance

Blue Cross commercial

Medicare Plus BlueSM

BCN commercial and BCN AdvantageSM

Revised May 2025

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

This document provides contact information for Blue Cross Blue Shield of Michigan and Blue Care Network departments and contracted vendors.

Use these links to go directly to a section within this document:

- Blue Cross commercial provider resources
- Medicare Plus Blue provider resources
- BCN commercial and BCN Advantage provider resources

Information about submitting prior authorization requests

This document includes information about submitting prior authorization requests.

- For commercial members, <u>Michigan's prior authorization law</u>* requires health care providers to submit prior authorization requests electronically. Alternate submission methods (phone or fax) are allowed in the case of temporary technological problems, such as power or internet outages.
- For Medicare Advantage members, submit prior authorization requests using any of the methods outlined in this document.

See the <u>Getting Started</u> page on **ereferrals.bcbsm.com** for information about submitting prior authorization requests electronically.

Blue Cross commercial provider resources

You can find additional information about Blue Cross provider resources in the Blue Pages Directory chapter of the *Blue Cross Commercial Provider Manual*.

To access the manual:

- 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. Scroll down and click on Provider manuals.
- 5. Click the Blue Cross commercial link.



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Blue Cross commercial	
Service	Details
Behavioral health	Submit and view prior authorization requests through our provider portal. Log in to availity.com *, click Payer Spaces and then click the BCBSM and BCN logo. On the Applications tab, click the Blue Cross Behavioral Health tile.
	To submit prior authorization requests by phone, call the appropriate number:
	• Traditional: 1-800-762-2382
	 Michigan Blue Cross and Blue Shield Federal Employee Program®: 1-800-342-5891 Michigan MESSA: 1-877-866-2395
	State of Michigan: 1-866-503-3158
	UAW Retirees Medical Benefit Trust: 1-877-228-3912
	General Motors Salaried: 1-877-240-0705
	General Motors Hourly: 1-877-264-6690
	For all member benefit-related questions: Refer to the Provider Inquiry row later in this table.
Benefits and eligibility	Availity® Essentials: Log in to our provider portal (<u>availity.com</u> *). For Availity Essentials access or technical assistance, call 1-800-AVAILITY (282-4548).
	Provider Inquiry: Refer to the Provider Inquiry row later in this table.
Blue Cross®	To refer a patient for care management services:
Cordinated	Federal Employee Program members: Call 1-800-775-2583.
Care	MESSA members: Call 1-800-441-4626.
	All other members: Call 1-800-845-5982.
Blue Cross	All users: Call 1-800-775-BLUE (2583).
Health & Well- Being SM	TTY users (only): Call 711.
Claims	For electronic billing or enrollment: See the For Providers: How do I sign up for Electronic Data Interchange? page on bcbsm.com.
	For Availity access or technical help: Call 1-800-AVAILITY (282-4548).
	Check claim status using our automated response system: See the Provider Inquiry row later in this table.



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Service	Details
Continuous glucose monitor products	 For Blue Cross commercial members who have both medical and pharmacy benefits through Blue Cross: Submit requests to a DME supplier to obtain CGM products under the medical
	benefit. Northwood Inc. is the preferred provider for medical supplies, including CGM products, for members who have coverage through fully insured groups or individual coverage. Call Northwood's customer service department at 1-800-393-6432 to identify a contracted supplier.
	 Send a prescription to a participating network pharmacy to obtain CGM products under the pharmacy benefit.
	For Blue Cross commercial members who have only medical benefits through Blue Cross: Submit requests to a DME supplier to obtain CGM products under the medical benefit. Northwood Inc. is the preferred provider for medical supplies, including CGM products, for members who have coverage through fully insured groups or individual coverage. Call Northwood's customer service department at 1-800-393-6432 to identify a contracted supplier.
	For additional information, see the document titled <u>Continuous glucose monitor products:</u> <u>FAQs for prescribing providers.</u>
Drugs covered under the medical benefit or under	The Blue Cross Pharmacy department manages prior authorizations for most drugs covered under the medical benefit and the pharmacy benefit.
the pharmacy	For medical benefit drugs, see the <u>Blue Cross Medical Benefit Drugs</u> page.
benefit	For pharmacy benefit drugs, see the <u>Blue Cross Pharmacy Benefit Drugs</u> page.
	Important: For information about oncology and supportive care drugs, see the <i>Oncology</i> and supportive care drugs — medical benefit and pharmacy benefit row later in this table.
Durable medical equipment, prosthetics and orthotics and medical supplies	Northwood Inc. is the preferred provider for DME, P&O and medical supplies (including diabetes supplies). Northwood manages prior authorizations and the provider network for fully insured members (group and individual). Call Northwood's customer service department at 1-800-393-6432 to identify a contracted supplier.
	Refer to the Provider Inquiry row later in this table.
Laboratory	Capitated laboratory program: Call Quest Diagnostics, an independent company, at 1-866-697-8378.
Oncology and supportive care drugs — medical benefit and pharmacy benefit	OncoHealth, an independent company, administers the Oncology Value Management program for all fully insured members and for self-funded groups that participate in the program.
	See the <u>Blue Cross Medical Benefit Drugs</u> page and the <u>Blue Cross Pharmacy Benefit Drugs</u> page for additional information.



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Service	Details
Pharmacy Services	 Pharmacy Services Clinical Help Desk: Call 1-800-437-3803. Walgreens Specialty Pharmacy, an independent company: Call 1-866-515-1355. Pharmacy benefit manager: Call 1-800-437-3803.
Provider enrollment and change requests	Access forms: Join Our Provider Network page at bcbsm.com All providers: Call 1-800-822-2761 / Fax 1-866-900-0250 / CAQH Help Desk: Call 1-888-599-1771.
Provider Inquiry	Use Provider Inquiry to receive claims, benefits and eligibility information, 24 hours a day, seven days a week. Plus, you can speak to a representative during regular business hours. (Refer to the Blue Pages Directory chapter of the Blue Cross PPO Provider Manual for hours.)
	Physicians and other professional providers of care: Call 1-800-344-8525.
	Hospital and facility providers: Call 1-800-249-5103.
	Hearing and vision providers: Call 1-800-482-4047.
	Dental care providers: Call 1-888-826-8152.
	Federal Employee Program: Call 1-800-840-4505.
	Blue Cross employees (only): Call 1-877-258-0167.
Provider Outreach	To find provider consultants: Visit bcbsm.com/providers > Help > Contact Us.
Radiology management	Carelon Medical Benefits Management manages prior authorizations for high-tech radiology procedures. To submit a prior authorization request:
	Log in to <u>availity.com</u> *, click <i>Payer Spaces</i> and then click the BCBSM and BCN logo. On the Applications tab, click the <i>Carelon ProviderPortal</i> tile.
	• Call 1-800-728-8008.
Travel and guest member services	BlueCard® for Blue Cross members from other states traveling in Michigan: Check membership and eligibility at 1-800-676-2583.



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Medicare Plus Blue provider resources

For more detailed information about the topics in the following table, see the Blue Cross section of our **ereferrals.bcbsm.com** website and the <u>Medicare Plus Blue PPO Provider Manual</u>.

Medicare Plus Blue	
Service	Details
Acute inpatient admissions	Submit and view prior authorization requests through the e-referral system. Log in to availity.com *, click Payer Spaces and then click the BCBSM and BCN logo. On the Applications tab, click the e-referral tile.
Behavioral health	Submit and view prior authorization requests through our provider portal. Log in to availity.com*, click Payer Spaces and then click the BCBSM and BCN logo. On the Applications tab, click the Blue Cross Behavioral Health tile.
	Behavioral Health department: Call 1-888-803-4960 for general assistance with behavioral health services
	Medicare Plus Blue Behavioral Health Services: Call 1-877-293-2788 for criteria used to render decisions and to request a peer-to-peer conversation
Benefits and eligibility	Availity: Log in to our provider portal (<u>availity.com</u> *). For Availity Essentials access or technical assistance, call 1-800-AVAILITY (282-4548).
	Provider Inquiry: Call 1-866-309-1719.
Blue Cross Coordinated Care	For questions about our care management programs or to refer a patient for care management services, call Provider Inquiry at 1-866-309-1719.
Cardiology	Submit prior authorization requests to Carelon Medical Benefits Management by:
procedures — outpatient	Logging in to <u>availity.com</u> *, clicking <i>Payer Spaces</i> and then clicking the BCBSM and BCN logo. On the Applications tab, click the <i>Carelon ProviderPortal</i> tile.
	Calling the Carelon Contact Center at 1-800-728-8008.
Claims	For electronic billing or enrollment: See the For Providers: How do I sign up for Electronic Data Interchange? page on bcbsm.com.
	Access claims information through our provider portal (availity.com*): Call 1-800-AVAILITY (282-4548) for access or for technical assistance.
	Problems submitting medical claims: Call Provider Inquiry at 1-866-309-1719.
	Problems submitting dental claims: Call 1-844-876-7917.
Coordination of benefits	If a member has primary coverage with another plan, submit a claim for payment to that plan first. The amount we will pay depends on the amount paid by the primary plan. We follow all Medicare secondary-payer laws.



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Continuous glucose monitor products	Submit a prescription to a network pharmacy. Exception: UAW Retiree Medical Benefits Trust members must obtain CGMs through a DME supplier. For additional information, see the document titled Continuous glucose monitor products: FAQs for prescribing providers.
DME, P&O and medical supplies	Northwood Inc. is the preferred provider for DME, P&O and medical supplies (including diabetes supplies). Northwood manages prior authorizations and the provider network. Call Northwood's customer service department at 1-800-393-6432 to identify a contracted supplier. See also: Continuous glucose monitor products row earlier in this table.
Drugs covered under the medical benefit or under the pharmacy benefit	 The Blue Cross Pharmacy department manages prior authorizations for most drugs covered under the medical benefit and the pharmacy benefit. For medical benefit drugs, see the <u>Blue Cross Medical Benefit Drugs</u> page. For pharmacy benefit drugs, see the <u>Blue Cross Pharmacy Benefit Drugs</u> page. Important: For information about oncology and supportive care drugs, see the <i>Oncology and supportive care drugs — medical benefit and pharmacy benefit</i> row later in this table.
Laboratory	 Quest Diagnostics: Call 1-866-MY-QUEST (1-866-697-8378). LabCorp, an independent company: Call 1-888-LabCorp (1-888-522-2677). JVHL, an independent company: Call 1-800-445-4979.
Medical management and quality improvement	Call Provider Inquiry at 1-866-309-1719 for questions about our care management programs. Nurse case managers may contact you directly to coordinate care and services.
Musculoskeletal surgical procedures, including orthopedic and spinal procedures	Submit prior authorizations for orthopedic and spinal procedures through the TurningPoint provider portal, accessed through our provider portal (availity.com*). For more information regarding TurningPoint, an independent company, see the Blue Cross Musculoskeletal Services page on our ereferrals.bcbsm.com website. See also: Pain management row later in this table
Oncology and supportive care drugs — medical benefit and pharmacy benefit	OncoHealth administers the Oncology Value Management program for all Medicare Plus Blue members. See the Blue Cross Medical Benefit Drugs page and the Blue Cross Pharmacy Benefit Drugs page for additional information.



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Service	Details
Pain management procedures	Prior authorization isn't required for dates of service on or after May 1, 2025.
	Submit prior authorizations for pain management procedures with dates of service before May 1, 2025, through the TurningPoint provider portal, accessed through our provider portal (availity.com *).
	For more information regarding TurningPoint, an independent company, see the <u>Blue Cross</u> <u>Pain Management Services</u> page on our ereferrals.bcbsm.com website.
	See also: Musculoskeletal surgical procedures, including orthopedic and spinal procedures row later in this table
Pharmacy services	Pharmacy Services Clinical Help Desk: Call 1-800-437-3803.
Post-acute care	Blue Cross manages prior authorizations. Submit requests through the e-referral system.
	See the <u>Blue Cross Post-Acute Care</u> page on ereferrals.bcbsm.com for additional information.
Professional and facility enrollment	To join our provider network, visit <u>bcbsm.com/providers/network</u> .
Provider Inquiry	For non-behavioral health: Call 1-866-309-1719.
	For behavioral health: Call 1-888-803-4960
Provider consultants	To find provider consultants, go to bcbsm.com/providers > Help > <u>Contact Us</u> .
Radiation oncology services	Obtain prior authorization from eviCore® healthcare for outpatient radiation oncology services for Medicare Plus Blue members who reside in Michigan and use Michigan providers.
	Log in to <u>availity.com</u> *, click <i>Payer Spaces</i> and then click the BCBSM and BCN logo. On the Applications tab, click the <i>eviCore Provider Portal</i> tile.
	• For clinically urgent requests, call 1-855-774-1317 or fax to 1-800-540-2406.
Radiology	Submit prior authorization requests to Carelon Medical Specialty Management by:
procedures (high technology)	Logging in to <u>availity.com</u> *, clicking <i>Payer Spaces</i> and then clicking the BCBSM and BCN logo. On the Applications tab, click the <i>Carelon ProviderPortal</i> tile.
	Calling the Carelon Contact Center at 1-800-728-8008.
Sleep study	Submit prior authorization requests to Carelon Medical Benefits Management by:
services – in-lab	Logging in to <u>availity.com</u> *, clicking <i>Payer Spaces</i> and then clicking the BCBSM and BCN logo. On the Applications tab, click the <i>Carelon ProviderPortal</i> tile.
	Calling the Carelon Contact Center at 1-800-728-8008.



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Travel and guest member services	For eligibility and cost-sharing amounts for out-of-area members: Call the Nationwide network of Blue Plan providers via the Blue Cross and Blue Shield Association at 1-800-676-BLUE (2583) and provide the member's three-digit prefix located on the ID card. All Blue Medicare Advantage PPO plans participate in reciprocal network sharing.
Utilization	For prior authorization requests managed by Medicare Plus Blue and not by a vendor:
management department (medical) — Medicare Plus Blue	Submit and view prior authorization requests through the e-referral system. Log in to availity.com*, click Payer Spaces and then click the BCBSM and BCN logo. On the Applications tab, click the e-referral tile.
	Inpatient admissions call center: Call 1-866-807-4811 / After-hours number (no admissions calls): Call 1-800-851-3904.
	Acute inpatient admission expedited provider appeals: Call 1-866-807-4811.
	Provider requests for criteria: To access the criteria we use to make determinations on prior authorization requests submitted to Medicare Plus Blue, do one of these:
	 Visit the <u>Medicare Advantage Prior Authorization</u> page and click to open the criteria related to the service for which prior authorization was requested.
	o Call the Utilization Management department at 1-800-392-2512.

BCN commercial and BCN Advantage provider resources

For more detailed information about the topics in the following table, see the BCN section of our **ereferrals.bcbsm.com** website and the *BCN Provider Manual*.

To access the manual:

- 1. Log in to our provider portal (<u>availity.com</u>*).
- 2. Click Payer Spaces on the menu bar and then click the BCBSM and BCN logo.
- 3. Click the Resources tab.
- 4. Scroll down and click on Provider manuals.
- 5. Click the BCN commercial and BCN Advantage link.



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Behavioral health	Submit and view referral and prior authorization requests online. Log in to availity.com *, click Payer Spaces and then click the BCBSM and BCN logo. On the Applications tab, click the Blue Cross Behavioral Health tile.
	• For questions about authorizations and other general inquiries: Call Behavioral Health — BCN commercial at 1-800-482-5982 / BCN Advantage at 1-800-431-1059 (during business hours 8 a.m. to 5 p.m. Monday through Friday).
	Physician-to-physician review of determination (Physician Review Line): Call 1-877-293-2788 during business hours / 1-800-482-5982 after business hours, for emergency cases only.
Benefits and eligibility	Our provider portal: Log in to <u>availity.com</u> *. For Availity Essentials access or technical assistance, call 1-800-AVAILITY (282-4548).
	Provider Inquiry: See the phone numbers in the "Provider Inquiry" row later in this table.
Cardiology procedures	Carelon Medical Benefits Management manages prior authorizations for select procedures for BCN. Submit prior authorization requests by:
	Logging in to <u>availity.com</u> *, clicking <i>Payer Spaces</i> and then clicking the BCBSM and BCN logo. On the Applications tab, click the <i>Carelon ProviderPortal</i> tile.
	Calling the Carelon Contact Center at 1-844-377-1278.
	See the <u>BCN Cardiology Services page</u> for additional information.
Claims	For electronic billing or enrollment: See the For Providers: How do I sign up for Electronic Data Interchange? page on bcbsm.com.
	Access claims information through our provider portal (availity.com*): Call 1-800-AVAILITY (282-4548) for access or for technical assistance.
	Check claim status and additional claim details by calling Provider Inquiry: See the "Provider Inquiry" row later in this table.
	BCN clinical editing appeals: Fax to 1-877-284-2882 or mail to the address on the Clinical Editing Appeal Form.



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Service	Details
Continuous glucose monitor products	 For BCN commercial members who have both medical and pharmacy benefits through BCN:
	 Submit requests to Northwood, Inc. to obtain CGM products through a DME supplier under the medical benefit. Call Northwood's customer service department at 1-800-393-6432 to identify a contracted supplier.
	 Send a prescription to a participating network pharmacy to obtain CGM products under the pharmacy benefit.
	• For BCN commercial members who have only medical benefits through BCN: Submit requests to Northwood, Inc. to obtain CGM products through a DME supplier under the medical benefit. Call Northwood's customer service department at 1-800-393-6432 to identify a contracted supplier.
	For BCN Advantage members: Submit a prescription to a network pharmacy.
	Exception: UAW Retiree Medical Benefits Trust members must obtain CGMs through a DME supplier. Call Northwood's customer service department at 1-800-393-6432 to identify a contracted supplier.
	For additional information, see the document <u>Continuous glucose monitor products: FAQs</u> for prescribing providers.
Coordination of benefits	To report other insurance: Providers should direct members to log in to their member accounts and submit an online coordination of benefits form to BCN. Members can access and submit the form online. Note: The member, not the provider, must complete the online coordination of benefits form and submit it to BCN.
	To resolve questions about a member's coordination of benefits: Providers can call Provider Inquiry. Refer to the phone numbers in the "Provider Inquiry" row later in this table.
DME, P&O and medical supplies	Northwood Inc. manages prior authorizations and the provider network. Call Northwood's customer service department at 1-800-393-6432 to identify a contracted supplier.
	See also: Continuous glucose monitor products row earlier in this table
Drugs covered under the medical	The BCN Pharmacy department manages prior authorizations for most drugs covered under the medical benefit and the pharmacy benefit.
benefit or under the pharmacy benefit	For medical benefit drugs, see the <u>BCN Medical Benefit Drugs</u> page.
	For pharmacy benefit drugs, see the <u>BCN Pharmacy Benefit Drugs</u> page.
	Important: For information about oncology and supportive care drugs, see the <i>Oncology</i> and supportive care drugs — medical benefit and pharmacy benefit row later in this table.
Home health care (by home health care agencies only)	Home health care requires authorization only for providers not contracted with BCN. Call those requests in to BCN Utilization Management at 1-800-392-2512. For providers contracted with BCN, no authorization is required.
Laboratory	Contact JVHL: Call 1-800-445-4979 or fax 313-441-1668
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Service	Details
Musculoskeletal procedures, including orthopedic and spinal procedures	TurningPoint Healthcare Solutions LLC manages prior authorizations for certain orthopedic and spinal procedures for all BCN members. For additional information, see the BCN Musculoskeletal Services page on ereferrals.bcbsm.com .
Oncology and	OncoHealth administers the Oncology Value Management program as follows:
supportive care drugs — medical benefit	• For BCN commercial members: OncoHealth manages the program for all fully insured members and for self-funded groups that participate in the program.
and pharmacy	For BCN Advantage members: OncoHealth manages the program for all members.
benefit	See the <u>BCN Medical Benefit Drugs</u> page and the <u>BCN Pharmacy Benefit Drugs</u> page for additional information.
Pain	TurningPoint manages prior authorizations for pain management procedures as follows:
management procedures	 For BCN commercial members: Submit prior authorizations for pain management procedures through the TurningPoint provider portal, accessed through our provider portal (<u>availity.com</u>*).
	For BCN Advantage members:
	 Prior authorization isn't required for dates of service on or after May 1, 2025.
	 Submit prior authorizations for pain management procedures with dates of service before May 1, 2025, through the TurningPoint provider portal, accessed through our provider portal (<u>availity.com</u>*).
Pharmacy benefit drugs	• Prior authorization requests: Submit through <u>CoverMyMeds</u> ®* or call the Pharmacy Clinical Help Desk at 1-800-437-3803 or fax to the Help Desk at 1-877-442-3778.
	See the <u>BCN Pharmacy Benefit Drugs</u> page on ereferrals.bcbsm.com for additional information.
	• Claims processing inquiries (for pharmacies): Call the pharmacy benefit manager at 1-844-568-2159.
Post-acute care	BCN manages prior authorizations. Submit requests through the e-referral system.
	See the BCN Post-Acute Care page on ereferrals.bcbsm.com for more information.
Provider	Access forms at <u>Join Our Provider Network</u> webpage at bcbsm.com/providers
enrollment and change requests	All providers: Call 1-800-822-2761 / Fax 1-866-900-0250 / CAQH Help Desk: Call 1-888-599-1771
Provider Inquiry	 Provider Inquiry phone numbers: Professional providers call 1-800-344-8525; ancillary and facility providers call 1-800-249-5103; hearing, vision providers call 1-800-482-4047.
	Provider Inquiry fax numbers: For BCN commercial: 248-799-6969. For BCN Advantage: 1-866-364-0080.



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Provider consultants	To find provider consultants: Visit bcbsm.com/providers > Help > Contact Us.
PT, OT, ST by therapists / physical medicine services by chiropractors and by athletic trainers	 eviCore healthcare, an independent company, manages prior authorizations for these services. Note: For information about services for BCN commercial members with autism, refer to the BCN <u>Autism Services</u> webpage. Look under the heading "Autism-related physical, occupational and speech therapy services and physical medicine services by athletic trainers and chiropractors". Prior authorization requests: Submit prior authorization requests to eviCore electronically or by fax or phone. Refer to the <u>Outpatient rehabilitation services FAQ document</u>.
Quality Management	Email: BCNQIQuestions@bcbsm.com / Phone: 248-455-2808
Radiation oncology	eviCore healthcare manages prior authorizations for select radiation oncology procedures for BCN. Submit prior authorization requests by:
procedures	 Logging in to <u>availity.com</u>*, clicking <i>Payer Spaces</i> and then clicking the BCBSM and BCN logo. On the Applications tab, click the <i>eviCore Provider Portal</i> tile.
	• Calling 1-855-774-1317 or faxing 1-800-540-2406.
	See the <u>BCN Oncology Services</u> page for additional information.
Radiology procedures (high technology)	Carelon Medical Benefits Management manages prior authorizations for select procedures for BCN. To submit prior authorization requests: Log in to availity.com*, click Payer Spaces and then click the BCBSM and BCN logo.
	On the Applications tab, click the Carelon ProviderPortal tile.
	Calling the Carelon Contact Center at 1-844-377-1278.
	See the <u>BCN Radiology Services</u> , <u>High Tech</u> page for additional information.



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Travel and guest member	Blue Cross members from other states traveling in Michigan: Check membership, eligibility by doing the following:
services	1. Log in to <u>availity.com</u> *.
	2. Select Patient Registration.
	3. Click Eligibility and Benefits Inquiry.
	4. Select or key in provider's NPI.
	5. Under Patient Information, click <i>Click here</i> to search for Federal Employee Program or Blue Exchange members.
	6. Key in the following:
	o Patient ID
	o Patient Last Name
	o Patient First Name
	o Date of Birth
	7. Click Submit.
	If you don't have access to Availity, you can call 1-800-676-2583.
Utilization management department (medical) — BCN	Submit and view referral and authorization requests through the e-referral system. Log in to availity.com*, click Payer Spaces and then click the BCBSM and BCN logo. On the Applications tab, click the e-referral tile.
	Call center: Call 1-800-392-2512 / After-hours number (no admissions calls): Call 1-800-851-3904.
	Requests requiring clinical review (with clinical documentation): Fax 1-800-675-7278 (for other than home care; inpatient acute care medical/surgical admissions; and LTACH, SNF and rehab admissions)

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