



Prior Authorization of Outpatient Physical Therapy and Occupational Therapy Announcement

Preauthorization requirements expanded for Members with Medicare Plus BlueSM coverage from Blue Cross[®] Blue Shield[®] of Michigan

Effective January 1, 2018, all Skilled Nursing Facilities (SNF) and doctors with M.D., D.O., D.P.M and D.D.S degrees will be required to obtain preauthorization for all outpatient PT and OT rehabilitation services for members with Medicare Plus Blue, the Medicare Advantage PPO plan. The program applies to Michigan members being treated by Michigan health care providers. Speech therapy is not included in this program.

Please note: This new requirement pertains only to those residents in long term or custodial care and/or defined as 'outpatient' and billing under Medicare Advantage, Part B benefit. Preauthorization for 'inpatient' Post-Acute Care admissions will continue to be managed through the eviCore Post-Acute Care Program.

The following provider resources can be found at:

<https://www.evicore.com/healthplan/BCBSM>:

- Quick reference guide
- Frequently asked questions
- Clinical guidelines
- List of CPT codes that require prior authorization
- Online forms
- Provider Orientation PDF
- Provider Orientation Video

To request education and training on program processes, please contact the eviCore Provider Relations department at: 1-800-646-0418, option 3 or email: providerrelations@evicore.com.

Blue Cross Blue Shield of Michigan and Blue Care Network are nonprofit corporations and independent licensees of the Blue Cross and Blue Shield Association. eviCore is an independent company that manages prior authorization for Blue Cross Blue Shield of Michigan and Blue Care Network.