

Continue to answer InterQual Connect questions in the e-referral system while we investigate technical issues

In December 2024, we made minor changes to the InterQual[®] Connect[™] process we use to review certain prior authorization requests in the e-referral system for Medicare Plus Blue, Blue Care Network commercial and BCN Advantage members.

This change introduced an issue that causes prior authorization requests to pend for review for certain services in the e-referral system, even if the answers provided meet criteria. We are investigating the issue.

In the meantime, continue answering the InterQual Connect questions when they appear in the e-referral system. Answering the questions allows us to make determinations more quickly.

Here's what to do after answering InterQual Connect questions in the e-referral system:

1. On the Recommendations screen, do one of the following:

lf	Do this	
The recommended service is automatically	Click Review Summary.	
selected Tip: Look for a check mark to ensure the service is selected. See the image below for an example.	Important: If you don't select a recommended service, cases that meet criteria will pend for review. This will delay our processing of your request.	
The recommended service is not automatically selected	Select the service, and then click <i>Review Summary.</i>	
There is no recommendation	Click Review Summary.	

Reco	ommendations 🖸			CRITERIA NOT MET
Not	Recommended Current evid		following services:	
▲	Breast Reconstruction	Show codes		
	Recommenda	ions 🖸		CRITERIA MET
		lence supports services a truction - Capsular Contr		
	ck mark s that the			
 selected or not the 	has been REVIEW , whether le criteria met.	COMPLETE 🛇	REVIEW SUMMARY O	<u>Privacy Notice</u>



2. On the Review Summary screen: Review the summary and click *Complete* to submit the request.

Important: Don't click *Save Review.* This will cause your request to pend even if criteria are met and will delay the processing of your request. Always click *Complete* to submit the request.

InterQual® Review Summary			
Patient Name: Date of Birth:	Criteria Status: Criteria Met		
Created By:	Criteria Product: Medicare:Procedures		
Created Date: 01/23/2025, 11:03 AM EST	Criteria Subset: Breast Reconstruction Following Mastectomy		
Review Status: In Primary	NCD		
Completed Date:	Criteria Version: InterQual® 2024, Oct. 2024 Release		
Facility:	Determination #: 140.2		
Recommendatio	ns 🗸 indicates reviewer selection		
RECOMMENDED Evidence supports services as medically i	necessary.		
 Breast Reconstruction - NCD 			

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