

## Update: Prior authorization changes for blepharoplasty and percutaneous left atrial appendage closure devices starting Feb. 2

On Feb. 3, 2025, we published a provider alert with incomplete information. Percutaneous left atrial appendage closure devices no longer require prior authorization for Medicare Plus Blue, BCN commercial or BCN Advantage. We've updated this provider alert to show the complete information.

For dates of service on or after Feb. 2, 2025, Blue Cross Blue Shield of Michigan and Blue Care Network are changing the prior authorization process for the following services for the lines of business listed in the second column of the table.

| Service                                    | Affected lines of business  | What happened prior to Feb. 2   | What happens starting Feb. 2  |
|--|---|---|---|
| Blepharoplasty                             | <ul style="list-style-type: none"> <li>Medicare Plus Blue</li> <li>BCN Advantage</li> </ul>                         | A <b>custom</b> questionnaire opened in the e-referral system for procedure codes *15822, *15823, *67900, *67901, *67902, *67903, *67904, *67906 and *67908 | We retired the <b>custom</b> questionnaire for Medicare Plus Blue and BCN Advantage.<br><br>The <b>standard</b> questionnaire, titled <i>Blepharoplasty and repair of brow ptosis (outpatient)</i> , now opens in the e-referral system for the procedure codes listed in the column to the left. |
| Percutaneous left atrial appendage closure | <ul style="list-style-type: none"> <li>Medicare Plus Blue</li> <li>BCN commercial</li> <li>BCN Advantage</li> </ul> | A questionnaire opened in the e-referral system for procedure code *33340.  | This service doesn't require prior authorization for Medicare Plus Blue, BCN commercial or BCN Advantage.   |

We'll update the [Authorization criteria and preview questionnaires](#) document on [ereferrals.bcbsm.com](http://ereferrals.bcbsm.com) to reflect these changes.

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