

Answers to questions about changes to requirements for pain management procedures for our Medicare Advantage members

As we communicated previously, pain management services no longer require prior authorization for Medicare Plus Blue and BCN Advantage members for dates of service on or after May 1, 2025.

We've received some questions about this change, which are answered below.

If you have questions that aren't answered below, see the document titled <u>Musculoskeletal</u> <u>procedure authorizations: Frequently asked questions for providers</u>.

What pain management procedure codes no longer require prior authorization?

The following pain management procedure codes no longer require prior authorization for our Medicare Advantage members:

CPT and HCPCS codes					
*0213T	*0214T	*0215T	*0216T	*0217T	*0218T
*62320	*62321	*62322	*62323	*64479	*64480
*64483	*64484	*64490	*64491	*64492	*64493
*64494	*64495	*64625	*64628	*64629	*64633
*64634	*64635	*64636	*64640	G0260	

How do I update an existing TurningPoint pain management authorization for dates of service before May 1, 2025?

Complete the Post-service change request form and fax it to TurningPoint at 313-879-5509.

Note: If you already submitted a claim, click *Yes* for the question "Have you submitted a claim to Blue Cross or BCN?"

To access the form, click the link above or:

- 1. Go to ereferrals.bcbsm.com.
- 2. Click *Blue Cross* or *BCN*.
- 3. Click the *Pain Management* link.



Can I request advance coverage determinations for pain management procedures for dates of service on or after May 1, 2025?

Providers can request advance coverage determinations (also known as organization determinations) for pain management procedures for Medicare Advantage members.

The steps vary depending on the member's plan.

- For Medicare Plus Blue members: Do one of the following:
 - Fax the request to our Grievance and Appeals department at 1-877-348-2251.
 - Submit the request in writing to:

Grievances and Appeals Department Attn: Org Determination Blue Cross Blue Shield of Michigan P.O. Box 2627 Detroit, MI 48231-2627

• For BCN Advantage members: Submit a prior authorization request through the e-referral system.

Important: If you're prompted to complete a questionnaire after submitting the request, please ignore it. For additional information, see this <u>provider alert</u>.

<u>Subscribe</u> to Provider Alerts Weekly, a weekly email with a list of links to the previous week's provider alerts.

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