

Inpatient admissions for musculoskeletal procedures managed by TurningPoint

The processes and requirements for inpatient admissions for musculoskeletal procedures vary depending on whether the inpatient setting is being requested before or after the procedure is performed.

Before the procedure is performed

If you request the inpatient setting for a musculoskeletal procedure before the procedure is performed, TurningPoint Healthcare Solutions LLC reviews the setting as part of the prior authorization request as follows.

- **Level of care:** If you're requesting the inpatient setting for the procedure because the member may need a higher level of care following surgery, the member must meet the site of care and setting considerations in the pertinent TurningPoint medical policy. TurningPoint will use these considerations when evaluating the appropriateness of the inpatient setting.

Note: The TurningPoint medical policies are available in the TurningPoint provider portal.

- **Procedure is on the Centers for Medicare & Medicaid Services list of inpatient-only procedures:** If you're requesting the inpatient setting for a Medicare Plus Blue or BCN Advantage member and the procedure is on the CMS list of inpatient-only procedures, TurningPoint will approve that setting if they approve the prior authorization request for the procedure.

Note: If an authorization for a procedure that's on the list of inpatient-only procedures shows an outpatient setting for a Medicare Advantage member, contact TurningPoint toll-free at 1-833-217-9670 or locally at 313-908-6040 prior to performing the procedure. TurningPoint will update the setting on the authorization.

After the procedure is performed

If the member's condition changes during the already approved outpatient stay and the member meets InterQual[®] guidelines for an inpatient admission, submit a prior authorization request for the inpatient stay to Blue Cross Blue Shield of Michigan or Blue Care Network through the e-referral system.

Important:

- Be sure to attach clinical notes that support the **medical reason** for the inpatient admission.
- The following requests may be denied:
 - Requests that don't meet Blue Cross and BCN guidelines for inpatient admissions, which include InterQual guidelines for inpatient admissions

Note: For more information about clinical criteria, see the [Services That Need Prior Authorization](#) page (for commercial members) or the [Medicare Advantage Prior Authorization](#) page on **bcbsm.com**.

- Requests that don't include a medical reason for the change from outpatient admission to inpatient admission

Note: When entering requests for inpatient stays in the e-referral system, select "Inpatient Hospital" as the place of service, select "Direct" as the admission type and enter procedure code *99222.

Additional information

For additional information, see the following documents:

- [Musculoskeletal procedure authorizations: Frequently asked questions for providers](#) — We're updating this document to reflect the information above.
- [Submitting acute inpatient authorization requests](#)

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TurningPoint Healthcare Solutions LLC is an independent company that manages prior authorizations for musculoskeletal surgical and related procedures for Blue Cross Blue Shield of Michigan and Blue Care Network.