

Changes to prior authorization requirements for select services managed by Blue Cross and BCN starting Nov. 2

On Nov. 2, 2025, Blue Cross Blue Shield of Michigan and Blue Care Network changed prior authorization requirements for some services for Medicare Plus Blue, BCN commercial and BCN Advantage members.

Changes to prior authorization requirements and questionnaires

We changed prior authorization requirements and questionnaires for select services as follows.

Service	Affected lines of business	What changed
Gastric stimulation	<ul style="list-style-type: none"> BCN commercial BCN Advantage Medicare Plus Blue 	The <i>Gastric stimulation</i> questionnaire has one reworded question based on the Blue Cross/BCN medical policy for <i>Gastric Electrical Stimulation</i> .
Various	<ul style="list-style-type: none"> BCN commercial BCN Advantage 	<ul style="list-style-type: none"> Procedure codes *96567, *96570, *96571, C1789 and G2212 no longer require prior authorization. Procedure code Q2026 now requires prior authorization.

Preview questionnaires and medical necessity criteria

For some of the above services, health care providers are prompted to complete questionnaires in the e-referral system. Refer to the [Preview questionnaires and medical necessity criteria](#) on the **authorizations.bcbsm.com** website for:

- Links to preview questionnaires that show the questions you'll need to answer in the e-referral system so you can prepare your answers ahead of time
- Information about how to access medical necessity criteria and the criteria source for each service

As a reminder, we use the pertinent medical necessity criteria and your answers to the questionnaires in the e-referral system when making utilization management determinations on your prior authorization requests.

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