

Reminder: Urgent appeals are treated as member appeals, accepted only when member's situation is urgent

The following information was previously communicated in the October 2025 issue of [The Record](#) and the Nov.-Dec. 2025 issue of [BCN Provider News](#).

Health care providers have the right to appeal an adverse decision on a prior authorization request.

For prior authorization requests managed by Blue Cross Blue Shield of Michigan or Blue Care Network, here's what providers need to know about requesting an urgent (sometimes referred to as an expedited) appeal for Blue Cross and BCN commercial members.

When an appeal is considered urgent

An appeal is considered urgent when the time frame for making determinations for care that is routine or not life-threatening would do one of the following:

1. Seriously jeopardize the life or health of the individual or the ability of the member to regain maximum function.
2. In the opinion of a provider with knowledge of the member's medical condition, subject the member to severe pain that can't be adequately managed without the care or treatment that is the subject of the appeal.

When to request an urgent appeal

When the member's situation is considered urgent and that member hasn't received the service for which prior authorization was denied, the provider can request an urgent appeal on behalf of the member. If the urgent appeal is accepted, it will be treated as a member appeal.

How to request an urgent appeal

To request an urgent appeal, the provider should one of the following:

- For Blue Cross commercial members:
 - Call: 313-225-6800
 - Fax: 1-877-522-4767
- For BCN commercial members:
 - Call: 1-855-896-6231
 - Fax: 1-866-522-7345

When requesting an urgent appeal by phone, the provider will be asked to:

- Attest that the member's situation is urgent based on the definition of urgent.
- Fax all clinical information pertinent to the appeal.

When requesting an urgent appeal by fax, the provider should:

- Include all clinical information pertinent to the appeal.
- Indicate the reason the appeal is considered urgent.

Additional information

For more information about appealing adverse decisions made by Blue Cross or BCN Utilization Management, see the following:

- The *Utilization Management* chapter of the *Blue Cross Commercial Provider Manual*. To access this manual, see the instructions on the [Provider Manuals](#) webpage on **bcbsm.com**.
- The [Utilization Management](#) chapter of the *BCN Provider Manual*

The appeal process is also explained in the provider and member denial letters.

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