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MCG message

Title: **Ambulatory surgery center procedures policy - update**

Posting date: **October 31, 2022**

Blue Cross Complete periodically reviews its policies for alignment with industry best practices, and to promote safe and cost-effective care. As a result, the [policy](#) below which became effective June 1, 2020, will be discontinued effective December 1, 2022.

We appreciate your ongoing commitment to delivering high-quality health care to our members. If you have questions, contact your Blue Cross Complete provider account executive or call Blue Cross Complete Provider Inquiry at **1-888-312-5713**.

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*Our website is mibluccrosscomplete.com. While website addresses for other organizations are provided for reference, Blue Cross Complete doesn't control these sites and isn't responsible for their content.

MCG message

Title: **New ambulatory surgery center procedures policy**

Posting date: **4/24/2020**

Blue Cross Complete periodically reviews its policies for alignment with industry best practices, and to promote safe and cost-effective care. Performance of the procedures listed below in an in-network Ambulatory Surgery Center will help reduce wait time for our members and support continuity of care. **Effective 6/1/2020**, prior authorization is not required for any of the following procedures performed in an in-network Ambulatory Surgery Center.

- Abscess Drainage, Superficial
- Arthroscopy/Arthroplasty
- Carpal Tunnel Release
- Cataract-related Interventions
- Colonoscopy
- Cystourethroscopy
- Debridement
- Excision Superficial Soft Tumor
- Hernia Repair
- Hysteroscopy
- Laryngoscopy
- Lithotripsy
- Septoplasty, Submucous Resection
- Sinus Interventions
- Tonsillectomy and/or Adenoidectomy
- Trigger Finger Release
- Tympanostomy
- Upper Endoscopy

This list of procedures is subject to change. Please call our Utilization Management Department at 1-888-312-5713 (option 4) to verify prior authorization requirements before performing the service.

Note: Prior authorizations are required for the aforementioned procedures if performed in a hospital setting (e.g., hospital-based outpatient surgery center).

Performance of one of the above procedures in a hospital setting requires prior authorization. Justification for performing such procedures in a hospital setting may include, but is not limited to:



- Duration of patient stay associated with the service is likely to exceed 24 hours and/or require immediate access to services specific to the hospital setting or post-operative inpatient setting.
- Increased risk of complications due to severe comorbidity indicated in the American Society of Anesthesiologists Physical Status Classification System classification IV or higher (American Society of Anesthesiologist 2019; CMS, 2019a, CMS, 2019c).

Questions:

If you have questions about this communication, please contact your Blue Cross Complete provider account executive or the Provider Inquiry at 1-888-312-5713.