

**MCG message**

**To:** All Blue Cross Complete providers  
**Date:** February 28, 2023  
**Subject:** Blue Cross Complete – eviCore collaboration notice

Blue Cross Complete is pleased to announce our collaboration with eviCore healthcare to provide prior authorization management services for Blue Cross Complete members. eviCore, an Evernorth Health Services business, is a specialty medical benefits management company that collaborates with health plans to provide utilization management services.

**Effective May 1, 2023, Blue Cross Complete will require prior authorization from eviCore for the covered health care services listed below.** Services performed in conjunction with an inpatient stay, 23-hour observation, or emergency room visit are not subject to prior authorization requirements:

<b>Physical Therapy</b>	<b>Genetic Testing</b>	<b>Occupational Therapy</b>
<b>Joint &amp; Spine Surgery</b>	<b>Pain Management</b>	<b>Diagnostic Sleep Testing</b>

Services performed without following prior authorization requirements may not be reimbursed, and you may not seek reimbursement from Blue Cross Complete the member.

To request prior authorization:

- Log on to [www.evicore.com/pages/ProviderLogin.aspx](http://www.evicore.com/pages/ProviderLogin.aspx) (preferred).
- Call: 1-877-506-5193.
- Fax additional clinical information:
  - Joint and Spine Surgery, Medical Oncology, Pain Management and Radiation Oncology: 1-800-540-2406.
  - Genetic Testing: 1-844-545-9213.
  - Sleep Testing and Sleep DME 1-866-999-3510.
  - Physical and Occupational Therapy: 1-855-774-1319.



**For urgent requests: If services are required in less than 48 hours due to medically urgent conditions, please submit a request online at [www.evicore.com](http://www.evicore.com) and indicate that the procedure is NOT routine/standard.** Urgent requests can also be made by calling the toll-free number at 1-877-506-5193. Be sure to tell the representative that the request is for medically urgent care.

We recommend that ordering physicians request prior authorization and pass the approval information to the rendering facility at the time of scheduling. Prior authorizations contain approval numbers and information detailing what services or treatments have been authorized. If the service provided is different from what was initially authorized, the rendering facility must contact eviCore to make revisions and obtain prior authorization before submitting the claim.

Have questions about requesting prior authorizations? We recommend attending an online orientation session. The orientation schedule and program-training resources, including a list of CPT codes that require prior authorization from eviCore, are available at:

[www.evicore.com/resources/healthplan/blue-cross-complete-of-michigan](http://www.evicore.com/resources/healthplan/blue-cross-complete-of-michigan)

eviCore's Clinical Guidelines and request forms are available at [www.evicore.com](http://www.evicore.com).

Please call the eviCore Client and Provider Services department at 1-800-646-0418 (Option 4) if you have any questions or need more information.