Blue Cross Blue Shield Blue Care Network of Michigan

Nonprofit corporations and independent licensees of the Blue Cross and Blue Shield Association

Post-acute care

For skilled nursing, rehabilitation and long-term acute care facilities

Revised January 2026

UTILIZATION MANAGEMENT

Blue Cross Blue Shield of Michigan and Blue Care Network provide utilization management programs.

Utilization management programs focus on ensuring that patients get the right care at the right time in the right location through the prior authorization process.

These programs vary based on member coverage and may be administered by Blue Cross or BCN staff or by independent companies, as specified below.

Utilization management

- Blue Cross and BCN post-acute care admissions
- WellSky®

Keep reading to learn which members have access to or requirements under these programs. Programs may not apply to all members.

This document is subject to change. Access it through the Care and utilization management program: Overview for providers, *which is at the bottom of the authorizations.bcbsm.com home page, to ensure you're viewing the most up-to-date information.*

See also: Care management and utilization management programs: Overview for providers

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UTILIZATION MANAGEMENT

Blue Cross and BCN post-acute care admissions

Makes prior authorization determinations for post-acute care stays for:

- Blue Cross commercial — All fully insured groups, all self-funded groups* and all members with individual coverage
- BCN commercial — All fully insured groups, all self-funded groups* and all members with individual coverage

Submit prior authorization requests and clinical documentation through the e-referral system.

Peer-to-peer reviews

For information about peer-to-peer reviews, see the document How to request a peer-to-peer review with a Blue Cross or BCN medical director.

Appeals

For information about appealing utilization management decisions for inpatient prior authorization requests:

- For Blue Cross commercial, see the "Appealing prior authorization decisions" section in the Appeals and Problem Resolution chapter of the *Blue Cross Commercial Provider Manual*.
- For BCN commercial, see the "Appealing utilization management decisions" section of the Utilization Management chapter in the *BCN Provider Manual*.

Resources

- Post-acute care requirements: Information for providers PDF
- Post-Acute Care page at **authorizations.bcbsm.com**
- e-referral User Guide — For information about submitting prior authorization requests through the e-referral system

For Blue Cross commercial

The following chapters of the Blue Cross Commercial Provider Manual:

- Skilled Nursing Facility Services
- Long Term Acute Care Hospital Services
- Utilization Management

For BCN commercial

"Guidelines for transitional care" section in the Utilization Management chapter of the *BCN Provider Manual*

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UTILIZATION MANAGEMENT

WellSky

Makes prior authorization determinations for post-acute care stays as follows:

- Medicare Plus Blue — All groups and all members with individual coverage
- BCN Advantage — All groups and all members with individual coverage

Submit prior authorization requests and clinical documentation through the WellSky provider portal.

Peer-to-peer reviews

For information about peer-to-peer reviews, see the document titled Post-acute care services for Medicare Advantage members: Frequently asked questions for providers. Look in the section "How can I talk to a medical director at WellSky for a peer-to-peer review?"

Appeals

For information about appealing utilization management decisions for inpatient prior authorization requests:

- For Medicare Plus Blue, see the "Appealing Medicare Plus Blue's Decision" section in the Medicare Plus Blue PPO Provider Manual.
- For BCN Advantage, see the "BCN Advantage provider appeals" section in the BCN Advantage chapter of the *BCN Provider Manual*.

Resources

- Post-acute care services for Medicare Advantage members: Frequently asked questions for providers PDF
- Post-Acute Care page at **authorizations.bcbsm.com**

For Medicare Plus Blue

"Prior authorization of SNF, LTACH, and inpatient rehabilitation stays" section of the Medicare Plus Blue PPO Provider Manual

For BCN Advantage

BCN Advantage chapter of the *BCN Provider Manual*

ADDITIONAL INFORMATION

About this document

This document lists coverage exceptions for major groups.

It also refers to additional resources. For resources that are publicly available, we provide direct links. To access documents that aren't publicly available, including provider manual chapters:

1. Log in to our provider portal (availity.com**).
2. Click *Payer Spaces* on the menu bar and then click the BCBSM and BCN logo.
3. Click the *Resources* tab.
4. Click *Secure Provider Resources (Blue Cross and BCN)*.

Information for non-Michigan providers

See the following documents for prior authorization requirements.

- For Blue Cross commercial and Medicare Plus Blue members: Prior authorization requirements for Michigan and non-Michigan providers
- For BCN commercial and BCN Advantage members: Non-Michigan providers: BCN prior authorization requirements

You can view these documents and our medical policies through the Medical Policy & Pre-Cert/Pre-Auth Router. To access the router, go to bcbsm.com/providers, click *Resources*, scroll to the "Out-of-area prior authorization resources" section and click the *out-of-area router* link.

Reminder

As always, it's essential that providers check each member's eligibility and benefits prior to performing services.

Providers are responsible for identifying the need for prior authorization through our provider portal, Benefit Explainer or Provider Inquiry and for obtaining prior authorization for services, as needed.

*For self-funded plans, the employer assumes the risk for claims costs and pays a fee for administrative services provided by Blue Cross or BCN.

**Clicking this link means that you're leaving the Blue Cross Blue Shield of Michigan and Blue Care Network website. While we recommend this site, we're not responsible for its content.

Availity® is an independent company that contracts with Blue Cross Blue Shield of Michigan and Blue Care Network to offer provider portal and electronic data interchange services.

Tango and WellSky® are independent companies that review member health care services for appropriateness and medical necessity on behalf of Blue Cross Blue Shield of Michigan and Blue Care Network.