Blue Cross Blue Shield Blue Care Network of Michigan

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

Provider resource guide at a glance

Blue Cross commercial

Medicare Plus Blue℠

BCN commercial and BCN Advantage℠

Revised May 2026

This document provides contact information for Blue Cross Blue Shield of Michigan and Blue Care Network departments and contracted vendors.

Use these links to go directly to a section within this document:

Information about submitting prior authorization requests

This document includes information about submitting prior authorization requests.

- For commercial members, Michigan's prior authorization law* requires healthcare providers to submit prior authorization requests electronically. Alternate submission methods (phone or fax) are allowed in the case of temporary technological problems, such as power or internet outages.
- For Medicare Advantage members, submit prior authorization requests using any of the methods outlined in this document.

See the Getting Started page on **authorizations.bcbsm.com** for information about submitting prior authorization requests electronically.

Blue Cross commercial provider resources

You can find additional information about Blue Cross provider resources in the Blue Pages Directory chapter of the *Blue Cross Commercial Provider Manual*.

To access the manual:

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. Scroll down and click on *Provider manuals*.
5. Click the *Blue Cross commercial* link.

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Blue Cross commercial	
Service	**Details**
Behavioral health	**Submit and view prior authorization requests** through our provider portal. Log in to availity.com*, click *Payer Spaces* and then click the BCBSM and BCN logo. On the Applications tab, click the *Blue Cross Behavioral Health* tile. **To submit prior authorization requests by phone, call the appropriate number:** • Traditional: 1-800-762-2382 • Michigan Blue Cross and Blue Shield Federal Employee Program®: 1-800-342-5891 • Michigan MESSA: 1-877-866-2395 • State of Michigan: 1-866-503-3158 • UAW Retirees Medical Benefit Trust: 1-877-228-3912 • General Motors Salaried: 1-877-240-0705 • General Motors Hourly: 1-877-264-6690 **For all member benefit-related questions:** Refer to the Provider Inquiry row later in this table.
Benefits and eligibility	• **Availity® Essentials:** Log in to our provider portal (availity.com*). For Availity Essentials access or technical assistance, call 1-800-AVAILITY (282-4548). • **Provider Inquiry:** Refer to the Provider Inquiry row later in this table.
Blue Cross® Coordinated Care	To refer a patient for care management services: • **Federal Employee Program members:** Call 1-800-775-2583. • **MESSA members:** Call 1-800-441-4626. • **All other members:** Call 1-800-845-5982.
Blue Cross Health & Well-Being℠	• **All users:** Call 1-800-775-BLUE (2583). • **TTY users (only):** Call 711.
Claims	• **For electronic billing or enrollment:** See the For Providers: How do I sign up for Electronic Data Interchange? page on **bcbsm.com**. • **For Availity access or technical help:** Call 1-800-AVAILITY (282-4548). • **Check claim status using our automated response system:** See the Provider Inquiry row later in this table.

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Blue Cross commercial	
Service	**Details**

Continuous glucose monitor products	• **For Blue Cross commercial members who have both medical and pharmacy benefits through Blue Cross:**
	  ○ Submit requests to a DME supplier to obtain CGM products under the medical benefit. Northwood Inc. is the preferred provider for medical supplies, including CGM products, for members who have coverage through fully insured groups or individual coverage. Call Northwood's customer service department at 1-800-393-6432 to identify a contracted supplier.
	  ○ Send a prescription to a participating network pharmacy to obtain CGM products under the pharmacy benefit.
	• **For Blue Cross commercial members who have only medical benefits through Blue Cross:** Submit requests to a DME supplier to obtain CGM products under the medical benefit. Northwood Inc. is the preferred provider for medical supplies, including CGM products, for members who have coverage through fully insured groups or individual coverage. Call Northwood's customer service department at 1-800-393-6432 to identify a contracted supplier.
	For additional information, see the document titled Continuous glucose monitor products: FAQs for prescribing providers.

Drugs covered under the medical benefit or under the pharmacy benefit	The Blue Cross Pharmacy department manages prior authorizations for most drugs covered under the medical benefit and the pharmacy benefit. • For medical benefit drugs, see the Medical Benefit Drugs page. • For pharmacy benefit drugs, see the Pharmacy Benefit Drugs page. **Important:** For information about oncology and supportive care drugs, see the *Oncology and supportive care drugs — medical benefit and pharmacy benefit* row later in this table.
Durable medical equipment, prosthetics and orthotics and medical supplies	**Northwood Inc.**, an independent company, is the preferred provider for DME, P&O and medical supplies (including diabetes supplies). Northwood manages prior authorizations and the provider network for fully insured members (group and individual). Call Northwood's customer service department at 1-800-393-6432 to identify a contracted supplier. Refer to the Provider Inquiry row later in this table.
Laboratory	**Capitated laboratory program:** Call Quest Diagnostics, an independent company, at 1-866-697-8378.

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Blue Cross commercial	
Service	**Details**
Musculoskeletal surgical procedures, including orthopedic and spinal procedures	For most members, TurningPoint Healthcare Solutions, an independent company, manages prior authorizations for orthopedic and spinal procedures. Submit prior authorization requests through the TurningPoint provider portal, accessed through our provider portal (availity.com*). Also see the Pain management row later in this table. For Blue Cross and Blue Shield Federal Employee Program members with commercial plans, Blue Cross manages prior authorizations for certain musculoskeletal procedures for dates of service on or after Jan. 1, 2026. Submit prior authorization requests through the e-referral system, accessed through our provider portal (availity.com*). To learn more, see the Musculoskeletal Services page on our **authorizations.bcbsm.com** website.
Oncology and supportive care drugs — medical benefit and pharmacy benefit	OncoHealth, an independent company, administers the Oncology Value Management program for all fully insured members and for self-funded groups that participate in the program. See the Medical Benefit Drugs page and the Pharmacy Benefit Drugs page for additional information.
Pharmacy Services	• **Pharmacy Services Clinical Help Desk:** Call 1-800-437-3803. • **Walgreens Specialty Pharmacy, an independent company:** Call 1-866-515-1355. • **Pharmacy benefit manager:** Call 1-800-437-3803.
Provider enrollment and change requests	• **Access forms:** Join Our Provider Network page at bcbsm.com • **All providers:** Call 1-800-822-2761 / Fax 1-866-900-0250 / CAQH Help Desk: Call 1-888-599-1771.
Provider Inquiry	Use Provider Inquiry to receive claims, benefits and eligibility information, 24 hours a day, seven days a week. Plus, you can speak to a representative during regular business hours. (Refer to the Blue Pages Directory chapter of the *Blue Cross PPO Provider Manual* for hours.) • **Physicians and other professional providers of care:** Call 1-800-344-8525. • **Hospital and facility providers:** Call 1-800-249-5103. • **Hearing and vision providers:** Call 1-800-482-4047. • **Dental care providers:** Call 1-888-826-8152. • **Federal Employee Program:** Call 1-800-840-4505. • **Blue Cross employees (only):** Call 1-877-258-0167.
Provider Outreach	**To find provider consultants:** Visit **bcbsm.com/providers** > Help > Contact Us.

Blue Cross commercial	
Service	**Details**
Radiology management	**Carelon Medical Benefits Management**, an independent company, manages prior authorizations for high-tech radiology procedures. To submit a prior authorization request: • Log in to availity.com*, click *Payer Spaces* and then click the BCBSM and BCN logo. On the Applications tab, click the *Carelon ProviderPortal* tile. • Call 1-800-728-8008.

Sleep studies, in lab	• Carelon Medical Benefits Management manages prior authorizations for in-lab sleep studies for adult members who have commercial coverage through Chrysler, Delphi/Aptiv, General Motors or UAW Retiree Medical Benefits Trust. To submit a prior authorization request:
	  ○ Log in to availity.com*, click *Payer Spaces* and then click the BCBSM and BCN logo. On the Applications tab, click the *Carelon ProviderPortal* tile.
	  ○ Call 1-800-728-8008.
	• Blue Cross Utilization Management manages the following procedures for other Blue Cross commercial members:
	  ○ In-lab sleep studies
	  ○ Implantation of hypoglossal nerve stimulation devices
	To submit a prior authorization request, log in to availity.com*, click *Payer Spaces* and then click the BCBSM and BCN logo. On the Applications tab, click the *e-referral* tile.

Travel and guest member services	**BlueCard® for Blue Cross members from other states traveling in Michigan:** Verify membership and eligibility with the member's home plan by doing one of the following: • Accessing eligibility and benefits in our provider portal (availity.com*) • Calling the BlueCard Eligibility Call Center at 1-800-676-2583 (BLUE)

Medicare Plus Blue provider resources

For more detailed information about the topics in the following table, see the Blue Cross section of our **authorizations.bcbsm.com** website and the *Medicare Plus Blue PPO Provider Manual*.

Medicare Plus Blue	
Service	**Details**
Acute inpatient admissions	**Submit and view prior authorization requests** through the e-referral system. Log in to availity.com*, click *Payer Spaces* and then click the BCBSM and BCN logo. On the Applications tab, click the *e-referral* tile.

Provider resource guide at a glance

Medicare Plus Blue	
Service	**Details**
Behavioral health	• **Submit and view prior authorization requests** through our provider portal. Log in to availity.com*, click *Payer Spaces* and then click the BCBSM and BCN logo. On the Applications tab, click the *Blue Cross Behavioral Health* tile. • **Behavioral Health department:** Call 1-888-803-4960 for general assistance with behavioral health services • **Medicare Plus Blue Behavioral Health Services:** Call 1-877-293-2788 for criteria used to render decisions and to request a peer-to-peer conversation
Benefits and eligibility	• **Availity:** Log in to our provider portal (availity.com*). For Availity Essentials access or technical assistance, call 1-800-AVAILITY (282-4548). • **Provider Inquiry:** Call 1-866-309-1719.
Blue Cross Coordinated Care	For questions about our care management programs or to refer a patient for care management services, call **Provider Inquiry** at 1-866-309-1719.
Cardiology procedures — outpatient	Submit prior authorization requests to Carelon Medical Benefits Management by: • Logging in to availity.com*, clicking *Payer Spaces* and then clicking the BCBSM and BCN logo. On the Applications tab, click the *Carelon ProviderPortal* tile. • Calling the **Carelon Contact Center** at 1-800-728-8008.
Claims	• **For electronic billing or enrollment:** See the For Providers: How do I sign up for Electronic Data Interchange? page on **bcbsm.com**. • **Access claims information through our provider portal (availity.com*):** Call 1-800-AVAILITY (282-4548) for access or for technical assistance. • **Problems submitting medical claims:** Call Provider Inquiry at 1-866-309-1719. • **Problems submitting dental claims:** Call 1-844-876-7917.
Coordination of benefits	If a member has primary coverage with another plan, submit a claim for payment to that plan first. The amount we will pay depends on the amount paid by the primary plan. We follow all Medicare secondary-payer laws.
Continuous glucose monitor products	Submit a prescription to a network pharmacy. **Exception:** UAW Retiree Medical Benefits Trust members must obtain CGMs through a DME supplier. For additional information, see the document titled Continuous glucose monitor products: FAQs for prescribing providers.
DME, P&O and medical supplies	**Northwood Inc.** is the preferred provider for DME, P&O and medical supplies (including diabetes supplies). Northwood manages prior authorizations and the provider network. Call Northwood's customer service department at 1-800-393-6432 to identify a contracted supplier. See also: Continuous glucose monitor products row earlier in this table.

Medicare Plus Blue	
Service	**Details**
Drugs covered under the medical benefit or under the pharmacy benefit	The Blue Cross Pharmacy department manages prior authorizations for most drugs covered under the medical benefit and the pharmacy benefit. • For medical benefit drugs, see the Medical Benefit Drugs page. • For pharmacy benefit drugs, see the Pharmacy Benefit Drugs page. • **Important:** For information about oncology and supportive care drugs, see the *Oncology and supportive care drugs — medical benefit and pharmacy benefit* row later in this table.
Home healthcare (by home health agencies only)	Prior authorization is required as follows: • **For episodes of care that start on or after March 1, 2026, and for episodes that start before March 1 and extend through or beyond March 1:** Prior authorization is required through tango, an independent company. For more information about requirements for referring providers (acute care, post-acute care and community-based providers) and for home healthcare providers, see the Home Health Care Resources page on authorizations.bcbsm.com. • **For episodes of care that start and end before March 1, 2026:** Prior authorization isn't required.
Laboratory	• **Quest Diagnostics:** Call 1-866-MY-QUEST (1-866-697-8378). • **LabCorp, an independent company:** Call 1-888-LabCorp (1-888-522-2677). • **JVHL, an independent company:** Call 1-800-445-4979.
Medical management and quality improvement	Call **Provider Inquiry** at 1-866-309-1719 for questions about our care management programs. Nurse case managers may contact you directly to coordinate care and services.
Musculoskeletal surgical procedures, including orthopedic and spinal procedures	TurningPoint Healthcare Solutions, an independent company, manages prior authorizations for orthopedic and spinal procedures. Submit prior authorization requests through the TurningPoint provider portal, accessed through our provider portal (availity.com*). For more information regarding TurningPoint, an independent company, see the Musculoskeletal Services page on our **authorizations.bcbsm.com** website. See also: Pain management row later in this table
Oncology and supportive care drugs — medical benefit and pharmacy benefit	OncoHealth administers the Oncology Value Management program for all Medicare Plus Blue members. See the Medical Benefit Drugs page and the Pharmacy Benefit Drugs page for additional information.

Medicare Plus Blue	
Service	**Details**
Pain management procedures	Prior authorization isn't required for dates of service on or after May 1, 2025. Submit prior authorizations for pain management procedures with dates of service before May 1, 2025, through the TurningPoint provider portal, accessed through our provider portal (availity.com*). For more information regarding TurningPoint, an independent company, see the Pain Management Services page on our **authorizations.bcbsm.com** website. See also: Musculoskeletal surgical procedures, including orthopedic and spinal procedures row later in this table
Pharmacy services	**Pharmacy Services Clinical Help Desk:** Call 1-800-437-3803.
Post-acute care	• **For stays that start on or after Jan. 5, 2026:** WellSky, an independent company, manages prior authorizations. • **For stays that start on or before Jan. 4, 2026:** Blue Cross manages prior authorizations. Submit requests through the e-referral system. See the Post-Acute Care page on **authorizations.bcbsm.com** for additional information.
Professional and facility enrollment	To join our provider network, visit bcbsm.com/providers/network.
Provider Inquiry	• **For non-behavioral health:** Call 1-866-309-1719. • **For behavioral health:** Call 1-888-803-4960
Provider consultants	To find provider consultants, go to **bcbsm.com/providers** > Help > Contact Us.
Radiation oncology services	Obtain prior authorization from E**viCore by Evernorth**, an independent company, for outpatient radiation oncology services for Medicare Plus Blue members who reside in Michigan and use Michigan providers. • Log in to availity.com*, click *Payer Spaces* and then click the BCBSM and BCN logo. On the Applications tab, click the *eviCore Provider Portal* tile. • For clinically urgent requests, call 1-855-774-1317 or fax to 1-800-540-2406.
Radiology procedures (high technology)	Submit prior authorization requests to Carelon Medical Specialty Management by: • Logging in to availity.com*, clicking *Payer Spaces* and then clicking the BCBSM and BCN logo. On the Applications tab, click the *Carelon ProviderPortal* tile. • Calling the **Carelon Contact Center** at 1-800-728-8008.

Medicare Plus Blue	
Service	**Details**
Travel and guest member services	For out-of-area members: Verify benefits and eligibility before providing services in one of the following ways: • Through our provider portal (availity.com*). On the *Patient Registration* tab, select *Eligibility and Benefits Inquiry* and follow the prompts. • By calling 1-800-676-BLUE (2583) and providing the three-digit prefix located on the member's ID card. All Blue Medicare Advantage PPO plans participate in reciprocal network sharing.

Utilization management department (medical) — Medicare Plus Blue	For prior authorization requests managed by Medicare Plus Blue and not by a vendor:
	• **Submit and view prior authorization requests** through the e-referral system. Log in to availity.com*, click *Payer Spaces* and then click the BCBSM and BCN logo. On the Applications tab, click the *e-referral* tile.
	• **Inpatient admissions call center:** Call 1-866-807-4811 / **After-hours number** (no admissions calls): Call 1-800-851-3904.
	• Acute inpatient admission expedited provider appeals: Call 1-866-807-4811.
	• **Provider requests for criteria:** To access the criteria we use to make determinations on prior authorization requests submitted to Medicare Plus Blue, do one of these:
	  ○ Visit the Medicare Advantage Prior Authorization page and click to open the criteria related to the service for which prior authorization was requested.
	  ○ Call the Utilization Management department at 1-800-392-2512.

BCN commercial and BCN Advantage provider resources

For more detailed information about the topics in the following table, see the BCN section of our **authorizations.bcbsm.com** website and the *BCN Provider Manual*.

To access the manual:

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. Scroll down and click on *Provider manuals*.
5. Click the *BCN commercial and BCN Advantage* link.

BCN commercial and BCN Advantage	
Service	**Details**
Behavioral health	• **Submit and view referral and prior authorization requests** online. Log in to availity.com*, click *Payer Spaces* and then click the BCBSM and BCN logo. On the Applications tab, click the *Blue Cross Behavioral Health* tile. • **For questions about authorizations and other general inquiries:** Call Behavioral Health — BCN commercial at 1-800-482-5982 / BCN Advantage at 1-800-431-1059 (during business hours 8 a.m. to 5 p.m. Monday through Friday). • **Physician-to-physician review of determination (Physician Review Line):** Call 1-877-293-2788 during business hours / 1-800-482-5982 after business hours, for emergency cases only.
Benefits and eligibility	• **Our provider portal:** Log in to availity.com*. For Availity Essentials access or technical assistance, call 1-800-AVAILITY (282-4548). • **Provider Inquiry:** See the phone numbers in the "Provider Inquiry" row later in this table.
Cardiology procedures	**Carelon Medical Benefits Management** manages prior authorizations for select procedures for BCN. Submit prior authorization requests by: • Logging in to availity.com*, clicking *Payer Spaces* and then clicking the BCBSM and BCN logo. On the Applications tab, click the *Carelon ProviderPortal* tile. • Calling the **Carelon Contact Center** at 1-844-377-1278. See the Cardiology Services page for additional information.
Claims	• **For electronic billing or enrollment:** See the For Providers: How do I sign up for Electronic Data Interchange? page on **bcbsm.com**. • **Access claims information through our provider portal (availity.com*):** Call 1-800-AVAILITY (282-4548) for access or for technical assistance. • **Check claim status and additional claim details by calling Provider Inquiry:** See the "Provider Inquiry" row later in this table. • **BCN prospective editing reconsideration requests:** See the document titled Submitting a prospective editing reconsideration request: Instructions.

BCN commercial and BCN Advantage	
Service	**Details**

Continuous glucose monitor products	• **For BCN commercial members who have both medical and pharmacy benefits through BCN:**
	  ○ Submit requests to Northwood, Inc. to obtain CGM products through a DME supplier under the medical benefit. Call Northwood's customer service department at 1-800-393-6432 to identify a contracted supplier.
	  ○ Send a prescription to a participating network pharmacy to obtain CGM products under the pharmacy benefit.
	• **For BCN commercial members who have only medical benefits through BCN:** Submit requests to Northwood, Inc. to obtain CGM products through a DME supplier under the medical benefit. Call Northwood's customer service department at 1-800-393-6432 to identify a contracted supplier.
	• **For BCN Advantage members:** Submit a prescription to a network pharmacy.
	Exception: UAW Retiree Medical Benefits Trust members must obtain CGMs through a DME supplier. Call Northwood's customer service department at 1-800-393-6432 to identify a contracted supplier.
	For additional information, see the document Continuous glucose monitor products: FAQs for prescribing providers.

Coordination of benefits	• **To report other insurance:** Providers should direct members to log in to their member accounts and submit an online coordination of benefits form to BCN. Members can access and submit the form online. Note: The member, not the provider, must complete the online coordination of benefits form and submit it to BCN. • **To resolve questions about a member's coordination of benefits:** Providers can call Provider Inquiry. Refer to the phone numbers in the "Provider Inquiry" row later in this table.
DME, P&O and medical supplies	**Northwood Inc.** manages prior authorizations and the provider network. Call Northwood's customer service department at 1-800-393-6432 to identify a contracted supplier. See also: Continuous glucose monitor products row earlier in this table
Drugs covered under the medical benefit or under the pharmacy benefit	The BCN Pharmacy department manages prior authorizations for most drugs covered under the medical benefit and the pharmacy benefit. • For medical benefit drugs, see the Medical Benefit Drugs page. • For pharmacy benefit drugs, see the Pharmacy Benefit Drugs page. **Important:** For information about oncology and supportive care drugs, see the *Oncology and supportive care drugs — medical benefit and pharmacy benefit* row later in this table.

BCN commercial and BCN Advantage	
Service	**Details**
Home healthcare (by home healthcare agencies only)	For BCN Advantage members only, prior authorization is required as follows: • **For episodes of care that start on or after March 1, 2026, and for episodes that start before March 1 and extend through or beyond March 1:** Prior authorization is required through tango. For more information about requirements for referring providers (acute care, post-acute care and community-based providers) and home healthcare providers, see the Home Health Care Resources page on authorizations.bcbsm.com. • **For episodes of care that start and end before March 1, 2026:** Prior authorization isn't required.
Laboratory	**Contact JVHL:** Call 1-800-445-4979 or fax 313-441-1668.
Musculoskeletal procedures, including orthopedic and spinal procedures	**TurningPoint Healthcare Solutions LLC** manages prior authorizations for certain orthopedic and spinal procedures for all BCN members. For additional information, see the Musculoskeletal Services page on **authorizations.bcbsm.com**.
Oncology and supportive care drugs — medical benefit and pharmacy benefit	OncoHealth administers the Oncology Value Management program as follows: • **For BCN commercial members:** OncoHealth manages the program for all fully insured members and for self-funded groups that participate in the program. • **For BCN Advantage members:** OncoHealth manages the program for all members. See the Medical Benefit Drugs page and the Pharmacy Benefit Drugs page for additional information.

Pain management procedures	TurningPoint manages prior authorizations for pain management procedures as follows:
	• **For BCN commercial members:** Submit prior authorizations through the TurningPoint provider portal, accessed through our provider portal (availity.com*).
	• **For BCN Advantage members:**
	  ○ Prior authorization isn't required for dates of service on or after May 1, 2025.
	  ○ Submit prior authorizations with dates of service before May 1, 2025, through the TurningPoint provider portal, accessed through our provider portal (availity.com*).

Pharmacy benefit drugs	• **Prior authorization requests:** Submit through CoverMyMeds®* or call the Pharmacy Clinical Help Desk at 1-800-437-3803 or fax to the Help Desk at 1-877-442-3778. See the Pharmacy Benefit Drugs page on **authorizations.bcbsm.com** for additional information. • **Claims processing inquiries (for pharmacies):** Call the pharmacy benefit manager at 1-844-568-2159.

BCN commercial and BCN Advantage	
Service	**Details**

Post-acute care	• **For BCN commercial members:** BCN manages prior authorizations. Submit requests through the e-referral system.
	• **For BCN Advantage:**
	  ○ **For stays that start on or after Jan. 5, 2026:** WellSky manages prior authorizations.
	  ○ **For stays that start on or before Jan. 4, 2026:** BCN manages prior authorizations. Submit requests through the e-referral system.
	See the Post-Acute Care page on **authorizations.bcbsm.com** for more information.

Provider enrollment and change requests	• **Access forms** at Join Our Provider Network webpage at bcbsm.com/providers • **All providers:** Call 1-800-822-2761 / Fax 1-866-900-0250 / CAQH Help Desk: Call 1-888-599-1771
Provider Inquiry	• **Provider Inquiry phone numbers:** Professional providers call 1-800-344-8525; ancillary and facility providers call 1-800-249-5103; hearing, vision providers call 1-800-482-4047. • **Provider Inquiry fax numbers:** For BCN commercial: 248-799-6969. For BCN Advantage: 1-866-364-0080.
Provider consultants	**To find provider consultants:** Visit **bcbsm.com/providers** > Help > Contact Us.
PT, OT, ST by therapists / physical medicine services by chiropractors and by athletic trainers	• **EviCore by Evernorth**, an independent company, manages prior authorizations for these services. Note: For information about services for BCN commercial members with autism, refer to the BCN Autism Services webpage. Look under the heading “Autism-related physical, occupational and speech therapy services and physical medicine services by athletic trainers and chiropractors”. • **Prior authorization requests:** Submit prior authorization requests to EviCore electronically or by fax or phone. Refer to the Outpatient rehabilitation services FAQ document.
Quality Management	**Email:** BCNQIQuestions@bcbsm.com / **Phone:** 248-455-2808
Radiation oncology procedures	**EviCore by Evernorth** manages prior authorizations for select radiation oncology procedures for BCN. Submit prior authorization requests by: • Logging in to availity.com*, clicking *Payer Spaces* and then clicking the BCBSM and BCN logo. On the Applications tab, click the *eviCore Provider Portal* tile. • Calling 1-855-774-1317 or faxing 1-800-540-2406. See the Oncology Services page for additional information.

BCN commercial and BCN Advantage	
Service	**Details**
Radiology procedures (high technology)	**Carelon Medical Benefits Management** manages prior authorizations for select procedures for BCN. To submit prior authorization requests: • Log in to availity.com*, click *Payer Spaces* and then click the BCBSM and BCN logo. On the Applications tab, click the *Carelon ProviderPortal* tile. • Calling the **Carelon Contact Center** at 1-844-377-1278. See the Radiology Services, High Tech page for additional information.
Sleep studies, in lab	**BCN Utilization Management** manages prior authorizations the following procedures for adult BCN commercial members: • In-lab sleep studies • Implantation of hypoglossal nerve stimulation devices To submit a prior authorization request, log in to availity.com*, click *Payer Spaces* and then click the BCBSM and BCN logo. On the Applications tab, click the *e-referral* tile.
Travel and guest member services	**For BCN commercial and BCN Advantage members traveling outside of Michigan or within Michigan but out of their service area:** Verify benefits and eligibility before providing services in one of the following ways: • Through our provider portal (availity.com*). On the *Patient Registration* tab, select *Eligibility and Benefits Inquiry* and follow the prompts. • By calling 1-800-676-BLUE (2583) and providing the three-digit prefix located on the member's ID card. Note: Some members may have coverage only for urgent and emergency services while traveling.
Utilization management department (medical) — BCN	• **Submit and view referral and authorization requests** through the e-referral system. Log in to availity.com*, click *Payer Spaces* and then click the BCBSM and BCN logo. On the Applications tab, click the *e-referral* tile. • **Call center:** Call 1-800-392-2512 / **After-hours number** (no admissions calls): Call 1-800-851-3904. • **Requests requiring clinical review** (with clinical documentation): Fax 1-800-675-7278 (for other than home care; inpatient acute care medical/surgical admissions; and LTACH, SNF and rehab admissions)

*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.