Special Bulletin

For professional and facility providers

October 2, 2023

Advanced Imaging and Cardiology: Prior Auth Changes Occurring in the New Year

Highmark Blue Cross Blue Shield of Western New York (BCBSWNY) is making changes to prior authorization requirements for the Advanced Imaging and Cardiology Services Program.

eviCore's management of these services for providers in the Highmark BCBSWNY network will sunset on **December 31, 2023**. Highmark BCBSWNY will begin the utilization management of these services **effective January 1, 2024**.

Prior authorization requirements for advanced imaging and cardiology services are applicable to all Highmark BCBSWNY plans, including:

- Commercial
- Medicare Advantage (MA)
- Affordable Care Act (ACA)
- Federal Employee Program (FEP)
- Administrative Services Only (ASO)

These prior authorization requirements are subject to the member's benefit plan.

Medical Policy Update

The medical policies listed here will be established and become effective January 1, 2024.

Training

To help providers prepare for these upcoming changes, Highmark will offer both live and on-demand training. Training dates and information will be posted on the Provider Resource Center and be included in upcoming issues of <u>Provider News</u>.

Resources

Leading up to the **January 1, 2024, implementation**, *Provider News* will continue to be your source for additional information regarding these changes. If you're not currently receiving Highmark's monthly enewsletter, you can sign up **here**.

For additional resources on the Provider Resource Center, go to **AUTHORIZATIONS** on the left menu, click on **Procedures/Service Requiring Prior Authorization**. If you need assistance regarding electronic authorization workflows, you can email us at <u>ElecAuthSubmit@highmark.com</u>.

Important Information Regarding Authorizations

The <u>List of Procedures/DME Requiring Authorization</u> for Highmark is subject to change. During the year, Highmark makes several adjustments to the full list of outpatient procedures, services, durable medical equipment, and drugs requiring authorization.

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