

Blue EssentialsSM, Blue Advantage HMOSM, Blue PremierSM and MyBlue HealthSM Provider Manual -Roles and Responsibilities -Outpatient Lab and Radiology Guidelines

Please Note

Throughout this provider manual there will be instances when there are references unique to **Blue Essentials**, **Blue Advantage HMO**, **Blue Premier** and **MyBlue Health**. These specific requirements will be noted with the plan/network name. If a Plan/network name is not specifically listed or "**Plan**" is referenced, the information will apply to **all** HMO products.

In this Section,

The following topics are covered in this section:

Торіс	Page
Capitated Medical Groups - Important Note	B (d)— 2
Outpatient Lab and Radiology Overview	B (d)— 2
Laboratory Services	B (d)— 2
Prior Authorization for Certain Outpatient Lab Services	B (d)— 2
Outpatient Diagnostic Radiology Services	B (d)— 3

Updated 04-11-2023 Page B (d) — 1



Blue Essentials, Blue Advantage HMO, Blue Premier and MyBlue Health Provider Manual - Roles and Responsibilities - Outpatient Lab and Radiology Guidelines

Capitated Medical Groups Important Note Health care providers who are contracted/affiliated with a capitated Medical Group must contact the Medical Group for instructions regarding referral and preauthorization processes, contracting and claims-related questions. Additionally, health care providers who are not part of a capitated Medical Group but who provide services to a member whose PCP is contracted/affiliated with a capitated Medical Group must also contact the applicable Medical Group for instructions. Health care providers who are contracted/affiliated with a capitated Medical Group are subject to that entity's procedures and requirements for the Plan's provider complaint resolution.

Outpatient Lab and Radiology Overview

Blue Cross and Blue Shield of Texas (BCBSTX) Plan providers are responsible for ordering and where necessary prior authorizing outpatient lab and radiology services for plan members. The following are guidelines for these services.

Laboratory Services Plan providers should refer members to in-network lab providers for outpatient lab services. To locate participating labs in the Plan network, visit Provider Finder@ on the BCBSTX website.

Prior
Authorization for
Certain
Outpatient
Lab Services

BCBSTX is contracted with Carelon Medical Benefits Management (Carelon) to manage prior authorization services for certain lab services.

Providers should refer to the **Utilization Management** section of the <u>BCBSTX provider website</u> for current services requiring prior authorization or services where recommended clinical review (formerly predeterminations) is available. They should also check eligibility and benefits through Availity® or their preferred vendor to determine whether prior authorization through Carelon is required.

Refer to the <u>Carelon</u> pages for information on specific services requiring prior authorization through Carelon as well as how to prior authorize services.

Services performed without prior authorization or that do not meet medical necessity criteria may be denied for payment and the rendering provider may not seek reimbursement from the member.

Updated 04-11-2023 Page B (d) — 2



Blue Essentials, Blue Advantage HMO, Blue Premier and MyBlue Health Provider Manual - Roles and Responsibilities - Outpatient Lab and Radiology Guidelines

Outpatient Radiology Services

BCBSTX has an agreement with <u>Carelon</u> to manage prior authorizations for specific outpatient advanced imaging services for certain Plan members.

Providers should refer to the the Utilization Management section of the BCBSTX provider website for current services requiring prior authorization or services where recommended clinical review (formerly predeterminations) is available. They should also check eligibility and benefits through Availity® or their preferred vendor to determine whether prior authorization through Carelon is required. Refer to the Carelon page on the provider website for more information.

Radiology services whether they require prior authorization or not need to be provided by in-network providers.

If radiology services cannot be performed in the physicians or professional provider's office, the provider must send the member to a contracted imaging location within the member's provider network. This includes testing as well as the reading of test.

To locate an in-network facility participating in the member's Plan, visit Provider Finder[®] through the BCBSTX provider website.

Carelon Medical Benefits Management is an independent company that has contracted with BCBSTX to provide utilization management services for members with coverage through BCBSTX.

Availity is a trademark of Availity, LLC, a separate company that operates a health information network to provide electronic information exchange services to medical professionals. Availity provides administrative services to BCBSTX

BCBSTX makes no endorsement, representations or warranties regarding third party vendors and the products and services they offer.

Updated 04-11-2023 Page B (d) — 3