



**BlueCross BlueShield
of Texas**

Update to Prior Authorization Codes for Medicaid Members

What's changing?

Blue Cross and Blue Shield of Texas (BCBSTX) is changing prior authorization requirements for Medicaid members to reflect new, replaced or removed codes due to updates from Utilization Management or the American Medical Association (AMA). A summary of changes is included below.

More info:

Refer to **Prior Authorization Lists and Reports** on the **Utilization Management** section of our [Medicaid provider website](#).

Changes include:

- **July 1, 2021** - Removal of Advanced Imaging codes previously reviewed by eviCore
- **July 1, 2021** - Removal of Genetic Testing codes previously reviewed by eviCore
- **July 1, 2021** - Adding Genetic Testing codes to be reviewed by eviCore
- **July 1, 2021** - Adding Specialty Drug codes to be reviewed by eviCore

Check Eligibility and Benefits:

To identify if a service requires prior authorization for our members, check eligibility and benefits through [Availity®](#) or your preferred vendor.

Avoid post-service medical necessity reviews and delays in claim processing by obtaining prior authorization before rendering services. If prior authorization is required, 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.

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

eviCore healthcare (eviCore) is an independent specialty medical benefits management company that provides utilization management services for BCBSTX.

The vendors are solely responsible for the products or services they offer. If you have any questions regarding any of the products or services they offer, you should contact the vendor(s) directly.

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