



Suite 1300  
4000 Town Center  
Southfield, MI 48075

[mibluccrosscomplete.com](http://mibluccrosscomplete.com)

**MCG message**

**To:** All Blue Cross Complete providers  
**Date:** October 9, 2023  
**Subject:** **Updated Blue Cross Complete authorization requirements**

Blue Cross Complete recently updated plan authorization requirements.

Effective Nov. 1, 2023, Blue Cross Complete will no longer require prior authorization for the following services:

- prenatal risk assessment (H1000)
- penile torsion repair (54360, 54380, 54385, 54390)
- liver and renal biopsy (47000, 47001, 50200, 50205)
- wart removal (17110, 17111 (dx B07)
- CT or MRI guidance (77012)
- digital blocks (64455)

Starting Nov. 1, 2023, Blue Cross Complete **will require** prior authorization for the following services:

- 93740 thermography temp gradient studies (93740)
- S8080 scintimammography (S8080)
- TAG memo 006 - 81425-81427, 81546 genome sequencing, (81425, 81426, 81526)
- pediatric chordae repair (54300, 54304)

Full updated plan notification and authorization requirements are located on our website at [mibluccrosscomplete.com](http://mibluccrosscomplete.com), under the ***Prior Authorization Resources*** tab. Refer to the [Utilization management authorization requirements \(PDF\)](#) and the ***Prior Authorization Lookup Tool*** to learn more about benefits and services that require prior authorization.

If you have any questions, contact your Blue Cross Complete provider account executive or Blue Cross Complete Provider Inquiry at **1-888-312-5713**.

###