

December 2021

Prior Authorization Updates in the Provider Manual

Medicare **no longer requires** a prior authorization for the following procedures listed in the Standing Authorization section of the provider manual:

- Cardiovascular Section (page 89):
 - 92978
 - 92979
 - 93571
 - 93572
- Radiology Diagnostic Section — Transluminal Atherectomy (page 91):
 - 0234T - 0238T
 - 37225 - 37229
 - 37231 - 37235
- Radiology Ultrasound Section (page 91):
 - 76970 - 76998 — Other Procedures

We have updated the manual to reflect these changes.

Please note: Referrals from Primary Care Physicians are required for all BlueMedicare HMO products when a member needs treatment from specialists. Please refer to the provider manual for more information, including exceptions to referral requirements.

You can find the provider manual online by going to floridablue.com/providers, selecting **Tools & Resources** and clicking on [Manual for Physicians and Providers](#).