

## **Provider Appeal Changes:** Services No Longer Eligible for Provider Appeal Reviews

Effective June 9, 2025, our Provider Appeals and Disputes department implemented several changes for commercial and Medicare Advantage lines of business.

The changes outlined below apply to in-network and out-of-network providers:

- For all Florida Blue HMO and Florida Blue Medicare HMO products, providers are required to obtain an authorization for all Evaluation and Management services including situations where the services will be performed in Place of Service 19 (Off Campus-Outpatient Hospital) or 22 (On Campus-Outpatient Hospital). Claims for Evaluation and Management services with Place of Service 19 or 22 that deny for failure to obtain an authorization will no longer be eligible for a provider appeal review.
- For all Florida Blue HMO commercial products and BlueSelect products, providers are required to refer to and utilize Quest Diagnostics for all **drug screenings**. Denials for drug screening claims submitted by out-of-network providers will be ineligible for provider appeal reviews.
- Florida Blue and Florida Blue HMO products have benefit limits on certain services, such as a maximum number of visits in a calendar year. Claims that deny because an insured or member has reached any such benefit limitation will be ineligible for provider appeal review.

Provider appeals received for these services beginning June 9, 2025, will be voided as ineligible.

## **Important Reminders**

- Appeals must be submitted *within one year* of the date that appears on the respective remittance advice. We will not overturn claim denials if a provider fails to follow required procedures and time frames.
- In general, other than the applicable member responsibility under the member's plan, providers <u>may not balance bill members</u> for covered services, including disputed amounts.
- Florida Blue does not process provider appeals for the Federal Employee Program<sup>®</sup>, State Account, or BlueCard<sup>®</sup>.
- As a reminder for commercial plans, your contract includes an agreement to refer members to participating providers. Quest Diagnostics and its subsidiaries, AmeriPath and Dermpath Diagnostics, are the <u>preferred in-network laboratory providers</u> for most Florida Blue plans.