

Radiology Management Program

At Blue Cross and Blue Shield of Nebraska (BCBSNE), member safety is a top concern. To ensure the necessity and appropriateness of procedures and services for our members—your BCBSNE-covered employees and their eligible dependents—a prior authorization program is in place, which includes pre-service reviews.

Effective Oct. 1, 2016, BCBSNE will begin performing in-house radiology reviews for the following services:

- Computed Tomography (CT/CTA)
- Magnetic Resonance Imaging (MRI/MRA)
- Nuclear Cardiology
- Positron Emission Tomography (PET)

Beginning Oct. 1, 2016, if the services listed above are not preauthorized, the claim may be denied and your employees may be responsible for payment of the charges.

Please note: Plain radiology films, imaging studies performed in conjunction with emergency room services and inpatient hospitalizations are excluded from this requirement.

If your employees reside within Nebraska, contracting providers with BCBSNE are responsible for obtaining pre-service reviews for the services listed above. Nebraska-based providers have been notified about this change. If a contracting provider fails to obtain a pre-service review, he or she will be held responsible for any charges related to services performed.

If your employees reside within Nebraska and see non-contracting providers, these providers may not be aware of your health plan's preauthorization requirements. It is important that employees inform them of this step.

If you have employees who live outside of Nebraska, it is important to note that BCBSNE does not have contractual agreements with out-of-state providers. These providers may not be aware of your health plan's preauthorization requirements, so it is important that employees inform them of this step.



- For an out-of-state employee, it is ultimately his or her responsibility to see that a pre-service review takes place when required. If the employee's provider does not submit a pre-service request for the services listed above, the claims for those services will be denied and may be considered the employee's liability.
- To avoid possible denial and financial responsibility for the charges if a pre-service review is not done, please educate your employees on the services noted above, and advise them to request that their providers submit a pre-service review if needed, by visiting medicalpolicy.nebraskablue.com.
- Also note that if a pre-service review is submitted—but not approved—and the service is provided, your employees may be held liable for charges for services determined to be not medically necessary.

Important note: If your employees are BCBSNE members who reside in a contiguous county AND they see a BCBSNE-contracted provider (one who is contracted with the Methodist Health System, for example), their providers are responsible for obtaining the pre-service review. A contiguous county is defined as a border county (such as Harrison, Fremont, Mills and Pottawattamie counties) in another Blue Plan's service area one county over from the Plan's (which, in this case, is BCBSNE) own service area.