

Payment Policy | Drugs and Biologicals



EFFECTIVE DATE: 07|17|2012

POLICY LAST UPDATED: 07|17|2012

OVERVIEW

This policy documents reimbursement methods for drugs and biologicals.

PRIOR AUTHORIZATION

All claim submissions remain subject to Blue Cross Blue Shield of Rhode Island prior authorization requirements

POLICY STATEMENT

Blue Cross Blue Shield of Rhode Island has payment policies for various drugs and biologicals that are covered under the members medical coverage. This will ensure that claims are paid in accordance with industry standard coding practices, generally accepted clinical guidelines and in a consistent manner across the network. These edits do not take the place of prior authorization when that is required. They are applied to claims in order to screen for coding errors and dosage that exceeds generally accepted limits. Claims denials are subject to utilization review processes if the denial reason is one of medical necessity (e.g. diagnosis or unusual dosage). If there is no specific policy for an agent Blue Cross Blue Shield of Rhode Island will rely upon the following sources:

- Manufacturer's prescribing information (FDA approved label)
- Elsevier Gold Standard's Clinical Pharmacology
- Thomson MICROMEDEX® (DRUGDEX®, DrugPoints®)
- American Hospital Formulary System (AHFS) DI
- National Comprehensive Cancer Network (NCCN) Drugs & Biologics Compendium
- Local Coverage Determinations (LCD's)

These policies will address diagnostic indications, the appropriate dose and the appropriate frequency of administration as well as other industry standard guidelines.

MEDICAL CRITERIA

Not Applicable

BACKGROUND

This policy documents reimbursement methods for drugs and biologicals.

COVERAGE

**BlueCHiP for Medicare |
Commercial |**

Benefits may vary. Please refer to the appropriate Evidence of Coverage, Subscriber Agreement, or Benefit Booklet for applicable benefits/coverage.

CODING

Not applicable

RELATED POLICIES

None

PUBLISHED

Provider Update Sept 2012

REFERENCES

Not applicable

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