



Expansion of Carelon Medical Benefits Management, Inc. programs

Massachusetts | Commercial

Effective March 1, 2025, Carelon Medical Benefits Management will expand multiple programs to perform medical necessity reviews for additional procedures for our members. Carelon Medical Benefits Management works to improve healthcare quality and manage costs for today's most complex and prevalent tests and treatments, helping promote appropriate, safe, and affordable care.

The continued migration will expand clinical appropriateness review for procedures related to the following existing Carelon Medical Benefits Management programs: musculoskeletal, radiation oncology, radiology, and sleep.

The *Clinical UM Guidelines* and *Medical Policies* we adopted for medical necessity review are listed in the table below. Carelon Medical Benefits Management will begin accepting prior authorization requests on February 24, 2025, for dates of service on or after March 1, 2025.

Pre-service review requirements

For procedures scheduled to begin on or after March 1, 2025, all care providers must contact Carelon Medical Benefits Management to obtain a pre-service review for the services, including, but not limited to, the following non-emergency modalities. Please refer to the *Clinical Guidelines* at <https://wellpoint.com/mass> > *Providers* > *Provider Resources* > *Policies, Guidelines & Manuals* for complete code lists.

Note: All codes will be reviewed for medical necessity for the requested service and not for site of care.

Carelon Medical Benefits Management, Inc. is an independent company providing utilization management services on behalf of the health plan.

<https://www.wellpoint.com/mass/providers>

Claims are administered by Wellpoint Life and Health Insurance Company.
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