

Medical Policy

Drugs, devices, diagnostic procedures, medical treatments or procedures are **not covered by Blue Cross and Blue Shield of Minnesota and Blue Plus (Blue Cross) until final review** and approval by the Blue Cross Coverage Committee. This Committee reviews recommendations from the Medical and Behavioral Health Policy Committee, and the Pharmacy Committee. All claims are subject to post-service review for medical necessity and benefits.

This requirement of Committee review is a precondition of Blue Cross coverage and:

- Applies in addition to all other conditions and terms stated in Blue Cross contracts and stated herein; and
- Applies to medications and medical devices when administered in any manner that is approved by the U. S. Food and Drug Administration (FDA); and
- Applies to approved medications legally prescribed and medical devices legally used when administered in any manner that is not mentioned in the labeling approved by the FDA (referred to as an "off-label" use). Use of a medication or medical device for an indication, dosage form, dose regimen, population, or other use parameter not mentioned in the approved labeling is considered to be an "off-label" use.

Blue Cross reserves the right to revise, update and/or add to these policies at any time without notice. If members or providers have questions about a policy, they are welcome to contact Blue Cross.

How are Medical Policies developed?

Evidence-based medical policies are developed by the Medical Policy Team. The team first presents the medical policies to the Medical and Behavioral Health Policy Committee, which is comprised of practicing physicians and providers representing a variety of specialties and Blue Cross representatives. Final approval of medical policies occurs at the Blue Cross Coverage Committee.