

Name: Routine Code Maintenance Changes

Summary:	Blue Cross and Blue Shield of Vermont (Blue Cross VT) has reviewed codes and will be changing the processing of the codes.
Explanation:	This could result in some changes to: <ul style="list-style-type: none"> • Prior Approval • Investigational Services • Unit Designation • Informational • Other Changes • Fee/Allowed Amounts
Effective Date:	August 01, 2026

Below is an overview of our implementation of the new/revised codes effective August 01, 2026.

CHANGES IN REQUIREMENTS FOR CERTAIN SERVICES

There are changes in requirements for the following services.

Code	Processing through July 31, 2026	Change for August 01, 2026
J0738*	Requires Prior Approval	Medically Necessary
J1961*	Requires Prior Approval	Medically Necessary

*prior approval for pharmacy is through Optum Rx

Notice of Right to Object in Writing

In accordance with 18 V.S.A. § 9418c contracted providers have the right to object to new or modified policies and manuals.

Providers who object must do so within 60 days of the date the notice related to a policy or manual change. The rationale for the objection to the change must be in writing including related area(s) of the policy or manual and rationale or reasoning for the objection.

These objections are to be directed to Provider Contracting. This can be done by email at: providercontracting@bcbsvt.com or US Postal Service BCBSVT Attn: Provider Contracting, PO Box 186, Montpelier, VT 05601.

Within 5 business days of receipt, the sender will receive confirmation of receipt of the objection.