

3840 Kilroy Airport Way Long Beach, CA 90806

July 25, 2025

Subject: **Notification of October 2025 Updates to the** *Blue Shield Promise Health Plan Nursing Facilities Reference Guide*

Dear Provider:

Blue Shield Promise is revising the *Blue Shield Promise Health Plan Nursing Facilities Reference Guide* (Reference Guide). The changes in each provider manual section listed below are effective October 1, 2025.

On that date, you can search and download the revised manual on the Blue Shield Promise Provider website at www.blueshieldca.com/en/bsp/providers. Click on *Provider manuals* under the policies & guidelines heading in the middle of the page.

You may also request a PDF version of the revised *Blue Shield Promise Health Plan Nursing Facilities Reference Guide* be emailed to you, once it is published, by emailing providermanuals@blueshieldca.com.

The *Blue Shield Promise Health Plan Nursing Facilities Reference Guide* is included by reference in the agreement between Blue Shield of California Promise Health Plan (Blue Shield Promise) and those Medi-Cal providers contracted with Blue Shield Promise. If a conflict arises between the *Blue Shield Promise Health Plan Nursing Facilities Reference Guide* and the agreement held by the provider and Blue Shield Promise, the agreement prevails.

If you have any questions regarding this notice or about the revisions that will be published in the October 2025 version of this Reference Guide, please contact Blue Shield Promise Provider Customer Services at (800) 468-9935 [TTY 711] 6 a.m. to 6:30 p.m., Monday through Friday.

Sincerely,

Aliza Arjoyan

Senior Vice President

Provider Partnerships and Network Management

blueshieldca.com/promise

Updates to the October 2025

Blue Shield Promise Health Plan Nursing Facilities Reference Guide

<u>Submitting Initial Long-Term Care for Prior Authorization Requests to</u> Blue Shield Promise

Updated language, in bold face type, to note that when submitting an authorization request for long-term care, the documents listed in this section are required to be submitted in order to request an initial approval.

A Blue Shield Promise authorization request for Medi-Cal long-term care must be submitted on our long-term care treatment authorization request (LTC TAR) form, along with the **required** information listed below, to request an initial approval.

The LTC TAR form should be faxed to (844) 200-0121 and Ancillary Services Request to (323) 889-6577 for Blue Shield Promise members in both Los Angeles and San Diego counties.

- 1. Face sheet
- 2. Name of physician(s)
- 3. State treatment authorization request
- 4. Preadmission screening resident review (PASARR)
- 5. Durable Power of Attorney (DPOA)
- 6. Interdisciplinary team meeting notes
- 7. Medication list
- 8. Specialty list
- 9. Minimum DATA SET Assessment
- 10. Current history and physical or physician's progress notes
- 11. Medi-Cal Long-Term Care Facility Admission and Discharge Notification (MC 171
- 12. Certification for Special Treatment Program Services form HS231, if requesting intermediate care facility/developmentally disabled (ICF/DD)

Blue Shield Promise Nursing Facilities Reference Guide Change Notification re: October 2025 Updates

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