



Steps for obtaining authorization for facial feminization electrolysis or laser hair removal by non-participating providers

1. An authorization must be obtained for services. Your primary care provider or a provider from the Comprehensive Gender Services Program at Michigan Medicine can initiate the authorization through Blue Care Network, either through e-Referral or calling **800-392-2512**. They'll need the treating provider's name, NPI (or tax id if they're not a medical provider), diagnosis code, procedure code and dates of service.
2. The provider will need to submit documentation that shows the member meets criteria for this service due to the following:
 - Member is at least 18 years of age
 - Member has been diagnosed with gender dysphoria that is marked and sustained
 - One letter of assessment by a qualified health care professional, as defined in BCBS/BCN medical policy
 - Other possible causes of apparent gender incongruence have been identified and excluded
 - Mental health and physical conditions that could negatively impact the outcome of gender-affirming medical treatments have been assessed
 - The gender identity should be present for at least 12 months
3. If the service is approved, the requesting provider is informed, and an approval letter is sent to the member.
4. You may start treatment after authorization has been approved. You'll need to pay out of pocket and submit for reimbursement. The following is required to be submitted with your member reimbursement:
 - Completed [member reimbursement form](#)
 - Copy of approval letter from BCN
 - Receipt that shows proof of payment and date paid
 - Invoice from the treating provider which shows dates of service and provider information

If any of the above information is missing, it will delay the processing of your reimbursement or cause it to be rejected. The form can either be submitted by mail (PO Box 68767, Grand Rapids, MI 49516-8767), fax (**866-637-4972**) or by logging in to your member account at bcbsm.com. A PDF of the form can be found at bcbsm.com and search Blue Care Network member reimbursement form.

5. Authorizations are usually approved until the end of the current calendar year. If you'll need to continue these services beyond that date, your provider will need to contact BCN at **800-392-2512** to extend the authorization. A new authorization number will be issued, and a new letter will be sent. You'll need to submit this new letter with any reimbursement requests.

For questions, please contact Customer Service at **800-658-8878**.