

BlueCross BlueShield Global/GeoBlue Corporate Expat Health Plans
All Closed Requests Between January 1, 2023 and December 31, 2023
Between - 1/1/23 - 12/31/23

Plan Description	AUTH RQST TYPE CD	Care Start Date	Care End Date	DSCHG DT	AUTH RQST RCV DT	Category Name	Service Type Desc	DERIVED AUTH CATEGORY	Overall Determination	Review Type Desc	Proc CD	From Date	To Date	Units	Diag CD	Diag Desc	Status	Denial reason
BlueCross BlueShield Global Expat	Initial	1/3/2022	1/2/2023	1/2/2023	12/29/2021	OUTPATIENT	Pharmacy	OP Elective Medical	Partial Approval	Urgent Pre-Service	Q5119	1/3/2022	1/2/2023	364	C83.39	DIFFUSE LARGE B-CELL LYMPHOMA, EXTRANODAL AND SOLID ORGAN SITES	Approved	
BlueCross BlueShield Global Expat	Initial	6/23/2022	6/23/2023	6/23/2023	6/25/2022	OUTPATIENT	Pharmacy	OP Elective Medical	Approved	Non Urgent Pre-Service	J1745	6/23/2022	6/23/2023	365	K51.311	ULCERATIVE (CHRONIC) RECTOSIGMOIDITIS WITH RECTAL BLEEDING	Approved	
BlueCross BlueShield Global Expat	Initial	10/31/2022	4/29/2023	4/29/2023	10/13/2022	OUTPATIENT	Therapy	OP Elective Medical	Approved	Concurrent Review	97151	10/31/2022	4/29/2023	180	F84.0	AUTISTIC DISORDER	Approved	
BlueCross BlueShield Global Expat	Initial	10/31/2022	4/29/2023	4/29/2023	10/13/2022	OUTPATIENT	Therapy	OP Elective Medical	Approved	Concurrent Review	97153	10/31/2022	4/29/2023	180	F84.0	AUTISTIC DISORDER	Approved	
BlueCross BlueShield Global Expat	Initial	10/31/2022	4/29/2023	4/29/2023	10/13/2022	OUTPATIENT	Therapy	OP Elective Medical	Approved	Concurrent Review	97155	10/31/2022	4/29/2023	180	F84.0	AUTISTIC DISORDER	Approved	
BlueCross BlueShield Global Expat	Initial	10/31/2022	4/29/2023	4/29/2023	10/13/2022	OUTPATIENT	Therapy	OP Elective Medical	Approved	Concurrent Review	97154	10/31/2022	4/29/2023	180	F84.0	AUTISTIC DISORDER	Approved	
BlueCross BlueShield Global Expat	Initial	10/31/2022	4/29/2023	4/29/2023	10/13/2022	OUTPATIENT	Therapy	OP Elective Medical	Approved	Concurrent Review	97156	10/31/2022	4/29/2023	180	F84.0	AUTISTIC DISORDER	Approved	
BlueCross BlueShield Global Expat	Initial	11/1/2022	11/1/2023	11/1/2023	10/24/2022	OUTPATIENT	Pharmacy	OP Elective Medical	Approved	Non Urgent Pre-Service	J0585	11/1/2022	11/1/2023	365	L74.512	PRIMARY FOCAL HYPERHIDROSIS, PALMS	Approved	
BlueCross BlueShield Global Expat	Initial	11/17/2022	2/16/2023	2/16/2023	11/17/2022	OUTPATIENT	Dme Rental	OP Elective Medical	Approved	Concurrent Review	E0601	11/17/2022	2/16/2023	91	G47.33	OBSTRUCTIVE SLEEP APNEA (ADULT) (PEDIATRIC)	Approved	
BlueCross BlueShield Global Expat	Initial	12/20/2022	3/19/2023	3/19/2023	12/20/2022	OUTPATIENT	Dme Rental	OP Elective Medical	Approved	Urgent Pre-Service	E0601	12/20/2022	3/19/2023	89	G47.33	OBSTRUCTIVE SLEEP APNEA (ADULT) (PEDIATRIC)	Approved	
BlueCross BlueShield Global Expat	Initial	12/23/2022	12/22/2023	12/22/2023	12/23/2022	OUTPATIENT	Pharmacy	OP Elective Medical	Approved	Urgent Pre-Service	J2778	12/23/2022	12/22/2023	364	E11.3413	TYPE 2 DIABETES MELLITUS WITH SEVERE NONPROLIFERATIVE DIABETIC RETINOPATHY WITH MACULAR EDEMA, BILATERAL	Approved	
BlueCross BlueShield Global Expat	Initial	1/9/2023	4/8/2023	4/8/2023	12/28/2022	OUTPATIENT	Medical	OP Elective Medical	Approved	Urgent Pre-Service	97151	1/9/2023	4/8/2023	89	F84.0	AUTISTIC DISORDER	Approved	
BlueCross BlueShield Global Expat	Initial	1/9/2023	4/8/2023	4/8/2023	12/28/2022	OUTPATIENT	Medical	OP Elective Medical	Approved	Urgent Pre-Service	97152	1/9/2023	4/8/2023	89	F84.0	AUTISTIC DISORDER	Approved	
BlueCross BlueShield Global Expat	Initial	2/1/2023	4/30/2023	4/30/2023	1/30/2023	OUTPATIENT	Medical	OP Elective Medical	Approved	Urgent Pre-Service	78452	2/1/2023	4/30/2023	88	R07.9	CHEST PAIN, UNSPECIFIED	Approved	
BlueCross BlueShield Global Expat	Initial	2/27/2023	5/26/2023	5/26/2023	2/22/2023	OUTPATIENT	Medical	OP Elective Medical	Approved	Urgent Pre-Service	62321	2/27/2023	5/26/2023	88	M54.12	RADICULOPATHY, CERVICAL REGION	Approved	
BlueCross BlueShield Global Expat	Initial	3/5/2023	6/4/2023		2/22/2023	OUTPATIENT	Surgical	OP Elective Surgery	Denied	Urgent Pre-Service	36482	3/5/2023	6/4/2023	91	I87.2	VENOUS INSUFFICIENCY (CHRONIC) (PERIPHERAL)	Denied	Experimental - Investigational
BlueCross BlueShield Global Expat	Initial	3/5/2023	6/4/2023		2/22/2023	OUTPATIENT	Surgical	OP Elective Surgery	Denied	Urgent Pre-Service	36471	3/5/2023	6/4/2023	91	I87.2	VENOUS INSUFFICIENCY (CHRONIC) (PERIPHERAL)	Denied	Service Requested Not Medically Necessary
BlueCross BlueShield Global Expat	Initial	3/5/2023	6/4/2023		2/22/2023	OUTPATIENT	Surgical	OP Elective Surgery	Denied	Urgent Pre-Service	36483	3/5/2023	6/4/2023	91	I87.2	VENOUS INSUFFICIENCY (CHRONIC) (PERIPHERAL)	Denied	Experimental - Investigational
BlueCross BlueShield Global Expat	Initial	3/5/2023	6/4/2023		2/22/2023	OUTPATIENT	Surgical	OP Elective Surgery	Denied	Urgent Pre-Service	36470	3/5/2023	6/4/2023	91	I87.2	VENOUS INSUFFICIENCY (CHRONIC) (PERIPHERAL)	Denied	Service Requested Not Medically Necessary
BlueCross BlueShield Global Expat	Initial	3/1/2023	5/31/2023		3/2/2023	OUTPATIENT	Dme Rental	OP Elective Medical	Denied	Non Urgent Pre-Service	E0748	3/1/2023	5/31/2023	91	M48.061	SPINAL STENOSIS, LUMBAR REGION WITHOUT NEUROGENIC CLAUDICATION	Denied	Service Requested Not Medically Necessary
BlueCross BlueShield Global Expat	Initial	3/1/2023	5/31/2023		3/2/2023	OUTPATIENT	Dme Rental	OP Elective Medical	Denied	Non Urgent Pre-Service	20974	3/1/2023	5/31/2023	91	M48.061	SPINAL STENOSIS, LUMBAR REGION WITHOUT NEUROGENIC CLAUDICATION	Denied	Service Requested Not Medically Necessary
BlueCross BlueShield Global Expat	Initial	3/10/2023	6/9/2023	6/9/2023	3/4/2023	OUTPATIENT	Diagnostic	OP Elective Medical	Approved	Urgent Pre-Service	75574	3/10/2023	6/9/2023	91	R07.2	PRECORDIAL PAIN	Approved	
BlueCross BlueShield Global Expat	Initial	3/28/2023	6/27/2023	6/27/2023	3/23/2023	OUTPATIENT	Medical	OP Elective Medical	Approved	Non Urgent Pre-Service	62321	3/28/2023	6/27/2023	91	M54.12	RADICULOPATHY, CERVICAL REGION	Approved	
BlueCross BlueShield Global Expat	Initial	4/4/2023	7/9/2023	7/9/2023	4/4/2023	OUTPATIENT	Home Health Visits	Post Acute	Partial Approval	Urgent Pre-Service	59131	4/4/2023	5/4/2023	30	M62.81	MUSCLE WEAKNESS (GENERALIZED)	Approved	
BlueCross BlueShield Global Expat	Extension	4/4/2023	7/9/2023	7/9/2023	4/4/2023	OUTPATIENT	Home Health Visits	Post Acute	Partial Approval	Concurrent Review	59131	5/5/2023	6/4/2023	30	M62.81	MUSCLE WEAKNESS (GENERALIZED)	Denied	
BlueCross BlueShield Global Expat	Extension	4/4/2023	7/9/2023	7/9/2023	4/4/2023	OUTPATIENT	Home Health Visits	Post Acute	Partial Approval	Concurrent Review	59131	5/5/2023	6/5/2023	31	M62.81	MUSCLE WEAKNESS (GENERALIZED)	Approved	
BlueCross BlueShield Global Expat	Extension	4/4/2023	7/9/2023	7/9/2023	4/4/2023	OUTPATIENT	Home Health Visits	Post Acute	Partial Approval	Concurrent Review	59131	6/9/2023	7/9/2023	30	M62.81	MUSCLE WEAKNESS (GENERALIZED)	Approved	
BlueCross BlueShield Global Expat	Initial	4/14/2023	7/13/2023		4/5/2023	OUTPATIENT	Diagnostic	OP Elective Medical	Denied	Non Urgent Pre-Service	75571	4/14/2023	7/13/2023	90	Z82.49	FAMILY HISTORY OF ISCHEMIC HEART DISEASE AND OTHER DISEASES OF THE CIRCULATORY SYSTEM	Denied	Experimental - Investigational
BlueCross BlueShield Global Expat	Initial	4/14/2023	7/13/2023		4/5/2023	OUTPATIENT	Medical	OP Elective Medical	Denied	Urgent Pre-Service	75571	4/14/2023	7/13/2023	90	Z82.49	FAMILY HISTORY OF ISCHEMIC HEART DISEASE AND OTHER DISEASES OF THE CIRCULATORY SYSTEM	Denied	Experimental - Investigational
BlueCross BlueShield Global Expat	Initial	4/4/2023	10/4/2023	10/4/2023	4/5/2023	OUTPATIENT	Medical	OP Elective Medical	Approved	Urgent Pre-Service	97151	4/4/2023	10/4/2023	183	F84.0	AUTISTIC DISORDER	Approved	
BlueCross BlueShield Global Expat	Initial	4/4/2023	10/4/2023	10/4/2023	4/5/2023	OUTPATIENT	Medical	OP Elective Medical	Approved	Urgent Pre-Service	97153	4/4/2023	10/4/2023	183	F84.0	AUTISTIC DISORDER	Approved	
BlueCross BlueShield Global Expat	Initial	4/4/2023	10/4/2023	10/4/2023	4/5/2023	OUTPATIENT	Medical	OP Elective Medical	Approved	Urgent Pre-Service	97155	4/4/2023	10/4/2023	183	F84.0	AUTISTIC DISORDER	Approved	
BlueCross BlueShield Global Expat	Initial	4/4/2023	10/4/2023	10/4/2023	4/5/2023	OUTPATIENT	Medical	OP Elective Medical	Approved	Urgent Pre-Service	97156	4/4/2023	10/4/2023	183	F84.0	AUTISTIC DISORDER	Approved	
BlueCross BlueShield Global Expat	Initial	4/18/2023	7/17/2023	7/17/2023	4/14/2023	OUTPATIENT	Medical	OP Elective Medical	Approved	Urgent Pre-Service	62321	4/18/2023	7/17/2023	90	M54.12	RADICULOPATHY, CERVICAL REGION	Approved	
BlueCross BlueShield Global Expat	Initial	4/27/2023	7/26/2023	7/26/2023	4/27/2023	OUTPATIENT	Surgical	OP Elective Surgery	Partial Approval	Urgent Pre-Service	36475	4/27/2023	7/26/2023	90	I87.2	VENOUS INSUFFICIENCY (CHRONIC) (PERIPHERAL)	Approved	
BlueCross BlueShield Global Expat	Initial	4/27/2023	7/26/2023	7/26/2023	4/27/2023	OUTPATIENT	Surgical	OP Elective Surgery	Partial Approval	Urgent Pre-Service	36471	4/27/2023	7/26/2023	90	I87.2	VENOUS INSUFFICIENCY (CHRONIC) (PERIPHERAL)	Denied	
BlueCross BlueShield Global Expat	Initial	4/27/2023	7/26/2023	7/26/2023	4/27/2023	OUTPATIENT	Surgical	OP Elective Surgery	Partial Approval	Urgent Pre-Service	36476	4/27/2023	7/26/2023	90	I87.2	VENOUS INSUFFICIENCY (CHRONIC) (PERIPHERAL)	Approved	
BlueCross BlueShield Global Expat	Initial	5/1/2023	7/31/2023		5/2/2023	OUTPATIENT	Medical	OP Elective Medical	Denied	Urgent Pre-Service	97151	5/1/2023	7/31/2023	91	F84.0	AUTISTIC DISORDER	Denied	Service Requested Not Medically Necessary

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BlueCross BlueShield Global Expat	Initial	5/9/2023	7/9/2023	7/9/2023	5/8/2023	OUTPATIENT	Therapy	OP Elective Medical	Approved	Urgent Pre-Service	97151	5/9/2023	7/9/2023	61	F84.0	AUTISTIC DISORDER	Approved	
BlueCross BlueShield Global Expat	Initial	5/22/2023	11/21/2023	11/21/2023	5/18/2023	OUTPATIENT	Therapy	OP Elective Medical	Approved	Urgent Pre-Service	97151	5/22/2023	11/21/2023	183	F84.0	AUTISTIC DISORDER	Approved	
BlueCross BlueShield Global Expat	Initial	5/22/2023	11/21/2023	11/21/2023	5/18/2023	OUTPATIENT	Therapy	OP Elective Medical	Approved	Urgent Pre-Service	97152	5/22/2023	11/21/2023	183	F84.0	AUTISTIC DISORDER	Approved	
BlueCross BlueShield Global Expat	Initial	6/12/2023	12/11/2023	12/11/2023	6/2/2023	OUTPATIENT	Therapy	OP Elective Medical	Approved	Urgent Pre-Service	97153	6/12/2023	12/11/2023	182	F84.0	AUTISTIC DISORDER	Approved	
BlueCross BlueShield Global Expat	Initial	6/12/2023	12/11/2023	12/11/2023	6/2/2023	OUTPATIENT	Therapy	OP Elective Medical	Approved	Urgent Pre-Service	97151	6/12/2023	12/11/2023	182	F84.0	AUTISTIC DISORDER	Approved	
BlueCross BlueShield Global Expat	Initial	6/12/2023	12/11/2023	12/11/2023	6/2/2023	OUTPATIENT	Therapy	OP Elective Medical	Approved	Urgent Pre-Service	97155	6/12/2023	12/11/2023	182	F84.0	AUTISTIC DISORDER	Approved	
BlueCross BlueShield Global Expat	Initial	6/12/2023	12/11/2023	12/11/2023	6/2/2023	OUTPATIENT	Therapy	OP Elective Medical	Approved	Urgent Pre-Service	97156	6/12/2023	12/11/2023	182	F84.0	AUTISTIC DISORDER	Approved	
BlueCross BlueShield Global Expat	Initial	6/7/2023	9/6/2023		6/7/2023	OUTPATIENT	Medical	OP Elective Medical	Denied	Urgent Pre-Service	95810	6/7/2023	9/6/2023	91	G47.33	OBSTRUCTIVE SLEEP APNEA (ADULT) (PEDIATRIC)	Denied	Service Requested Not Medically Necessary
BlueCross BlueShield Global Expat	Initial	6/7/2023	9/6/2023		6/7/2023	OUTPATIENT	Medical	OP Elective Medical	Denied	Urgent Pre-Service	95811	6/7/2023	9/6/2023	91	G47.33	OBSTRUCTIVE SLEEP APNEA (ADULT) (PEDIATRIC)	Denied	Service Requested Not Medically Necessary
BlueCross BlueShield Global Expat	Initial	6/9/2023	9/8/2023	9/8/2023	6/13/2023	OUTPATIENT	Dme Rental	OP Elective Medical	Approved	Urgent Pre-Service	E0601	6/9/2023	9/8/2023	91	G47.33	OBSTRUCTIVE SLEEP APNEA (ADULT) (PEDIATRIC)	Approved	
BlueCross BlueShield Global Expat	Initial	6/10/2023	6/17/2023	6/17/2023	6/13/2023	OUTPATIENT	Home Health Visits	Post Acute	Approved	Urgent Pre-Service	G0299	6/10/2023	6/17/2023	7	P59.9	NEONATAL JAUNDICE, UNSPECIFIED	Approved	
BlueCross BlueShield Global Expat	Initial	6/10/2023	6/17/2023	6/17/2023	6/13/2023	OUTPATIENT	Home Health Visits	Post Acute	Approved	Urgent Pre-Service	G0300	6/10/2023	6/17/2023	7	P59.9	NEONATAL JAUNDICE, UNSPECIFIED	Approved	
BlueCross BlueShield Global Expat	Initial	6/14/2023	9/13/2023		6/14/2023	OUTPATIENT	Surgical	OP Elective Surgery	Denied	Urgent Pre-Service	36465	6/14/2023	9/13/2023	91	I87.2	VENOUS INSUFFICIENCY (CHRONIC) (PERIPHERAL)	Denied	Service Requested Not Medically Necessary
BlueCross BlueShield Global Expat	Initial	6/14/2023	9/13/2023		6/14/2023	OUTPATIENT	Surgical	OP Elective Surgery	Denied	Urgent Pre-Service	36466	6/14/2023	9/13/2023	91	I87.2	VENOUS INSUFFICIENCY (CHRONIC) (PERIPHERAL)	Denied	Service Requested Not Medically Necessary
BlueCross BlueShield Global Expat	Initial	7/3/2023	10/2/2023	10/2/2023	6/30/2023	OUTPATIENT	Diagnostic	OP Elective Medical	Approved	Non Urgent Pre-Service	78452	7/3/2023	10/2/2023	91	R07.9	CHEST PAIN, UNSPECIFIED	Approved	
BlueCross BlueShield Global Expat	Initial	7/10/2023	9/11/2023	9/11/2023	7/6/2023	OUTPATIENT	Home Health Visits	Post Acute	Approved	Urgent Pre-Service	S9131	7/10/2023	8/10/2023	31	M62.81	MUSCLE WEAKNESS (GENERALIZED)	Approved	
BlueCross BlueShield Global Expat	Extension	7/10/2023	9/11/2023	9/11/2023	7/6/2023	OUTPATIENT	Home Health Visits	Post Acute	Approved	Concurrent Review	S9131	8/11/2023	9/11/2023	31	M62.81	MUSCLE WEAKNESS (GENERALIZED)	Approved	
BlueCross BlueShield Global Expat	Initial	7/12/2023	10/11/2023	10/11/2023	7/8/2023	OUTPATIENT	Medical	OP Elective Medical	Approved	Urgent Pre-Service	75574	7/12/2023	10/11/2023	91	R94.31	ABNORMAL ELECTROCARDIOGRAM ECG EKG	Approved	
BlueCross BlueShield Global Expat	Initial	7/24/2023	10/23/2023	10/23/2023	7/25/2023	OUTPATIENT	Medical	OP Elective Medical	Approved	Urgent Pre-Service	78452	7/24/2023	10/23/2023	91	R07.89	OTHER CHEST PAIN	Approved	
BlueCross BlueShield Global Expat	Initial	8/16/2023	11/15/2023	11/15/2023	8/16/2023	OUTPATIENT	Medical	OP Elective Medical	Approved	Pre-Service	L1970	8/16/2023	11/15/2023	91	G80.8	OTHER CEREBRAL PALSY	Approved	
BlueCross BlueShield Global Expat	Initial	8/1/2023	8/1/2023	8/1/2023	9/20/2023	OUTPATIENT	Medical	OP Elective Medical	Approved	Retrospective	14301	8/1/2023	8/1/2023	0	D22.9	MELANOCYTIC NEVI, UNSPECIFIED	Approved	
BlueCross BlueShield Global Expat	Initial	10/19/2023	12/31/2023	12/31/2023	10/20/2023	OUTPATIENT	Medical	OP Elective Medical	Approved	Pre-Service	30140	10/19/2023	12/31/2023	73	J34.89	OTHER SPECIFIED DISORDERS OF NOSE AND NASAL SINUSES	Approved	
BlueCross BlueShield Global Expat	Initial	11/7/2023	12/31/2023	12/31/2023	11/8/2023	OUTPATIENT	D&F Infusion	OP Elective Medical	Approved	Pre-Service	J3358	11/7/2023	12/31/2023	54	K51.90	ULCERATIVE COLITIS, UNSPECIFIED, WITHOUT COMPLICATIONS	Approved	