

Blue Advantage Insight Newsletter

February 2021

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Louisiana

Blue Advantage (HMO) | Blue Advantage (PPO)

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Blue Cross and Blue Shield of Louisiana HMO offers Blue Advantage (HMO). Blue Cross and Blue Shield of Louisiana, an independent licensee of the Blue Cross and Blue Shield Association, offers Blue Advantage (PPO). Blue Advantage from Blue Cross and Blue Shield of Louisiana HMO is an HMO plan with a Medicare contract. Blue Advantage from Blue Cross and Blue Shield of Louisiana is a PPO plan with a Medicare contract. Enrollment in either Blue Advantage plan depends on contract renewal.

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Help Your Patients Start the Year Off Well!

The Annual Wellness Coupon Program is an initiative created to encourage Blue Advantage members to receive their annual wellness check-ups.

As a part of the program, members receive a personalized coupon based on past and commonly overlooked diagnoses. Members are instructed to schedule a wellness visit and take the coupon with them to the visit.


These coupons are to serve as an easy reference tool for providers to see what diagnoses may be applicable to the member being treated.

When members come in with these coupons, providers should review the diagnoses listed and mark any additional codes that are applicable. Providers receive a \$20 reimbursement for each completed coupon, in addition to their fee for services. Completed coupons can be faxed to 1-844-843-9770. If a member has already had a wellness visit for the year, they can schedule a second visit to use their coupon. The second visit is at no cost to the member when the provider performs and reports HCPCS code G0438 or G0439 for the wellness visit.

If a member loses their coupon or needs an extra copy, please call 1-844-753-1450 to request another one.

2021 ANNUAL WELLNESS EXAM COUPON - DO NOT DISCARD

If you have any questions, please call 1-855-545-9457 (TTY 711), Monday - Friday from 8 a.m. to 5 p.m.

 **Louisiana**

ATTENTION: Blue Advantage (HMO) | Blue Advantage (PPO) Member

Please take this coupon to your in-network Blue Advantage Primary Care Provider for an Annual Wellness exam AT NO CHARGE to you!

ATTENTION: HEALTHCARE PROVIDER & OFFICE MANAGER

Blue Advantage members have no deductibles, copays or coinsurance for this Annual Wellness exam. The following services (CPT codes) should be billed with the wellness ICD-10 Z00.00 or Z00.01 as primary, together with all other appropriate ICD-10 diagnosis codes including any of the diagnoses on the back of this page.

CODES TO BILL:

Annual Wellness Exam - G0438

AND THE FOLLOWING SCREENINGS:

85025 CBC	For Diabetics, add the following:
80053 CMP	83036 HgbA1C
80061 Lipid panel	82043 Urine Microalbumin
81002 Urine Dip	Schedule an annual eye exam for retinopathy screening
93000 EKG if indicated (e.g., irregular heart rhythm)	For Females, consider the following:
82270 FOBT x 3 for patients 50-75	Mammogram and Pap Smear
G0328 iFOBT x 1	

Monitoring of chronic stable conditions, prescription refills and vaccinations may also be included in the examination.

Blue Cross and Blue Shield of Louisiana HMO offers Blue Advantage (HMO). Blue Cross and Blue Shield of Louisiana, an independent licensee of the Blue Cross and Blue Shield Association, offers Blue Advantage (PPO).

Primary Care Provider Selection

A primary care provider (PCP) serves as the member's total care coordinator for non-emergent care. PCPs are available to members 24 hours a day, seven days a week through regular scheduling or on-call coverage.

Blue Advantage members have the option to select a PCP at the time of plan enrollment. If the member has not identified a PCP, one may be assigned for them. In rare situations, a member may be retroactively assigned to a PCP. For example, the member's PCP may have terminated the contract without notification because of illness or death.

We will assist members in finding a new PCP as quickly as possible to promote continuity of healthcare and coverage, but there may be a slight time lapse that causes the assignment to have a retroactive effective date.

Members can change their PCP to another Blue Advantage contracted PCP at any time for any reason by contacting Blue Advantage Customer Service at 1-866-508-7145. The change will be effective the first day of the month following receipt of the member's request.

Providers can view a member's assigned PCP through the Member Lookup feature on the Blue Advantage Provider Portal. Go to www.BCBSLA.com/providers, then click "Blue Advantage" under "Other Sites."

Important Authorization Reminders

Vantage Health Plan processes authorizations and claims for dates of service on and after January 1, 2021. Here are a few reminders to promote correct processes and ensure there are no delays in your business operations or patient care.

Authorizations

You may request prior authorization for the following outpatient services through the Online Auth Portal feature in the 2021 Blue Advantage Provider Portal:

- OPMD – a procedure performed in the office setting
- OPFAC – a procedure performed in an outpatient facility setting
- ASU – a procedure performed in an ambulatory surgical setting
- POC – authorization for post-operative care for surgeries with 90-day global periods

You may also submit these prior authorization requests using the appropriate Blue Advantage authorization request form, via fax to 1-877-528-5816.

The Online Auth Portal feature is not available for the following authorization types.

Type of Service	Fax Number
<ul style="list-style-type: none">• Inpatient	1-877-528-5818
<ul style="list-style-type: none">• Wound Care• Therapy• Durable Medical Equipment (DME)• Transplants• Ambulance Transports	1-877-528-5816
<ul style="list-style-type: none">• Home Health	(318)-812-6265
<ul style="list-style-type: none">• Part B Drugs	1-877-528-5816
<ul style="list-style-type: none">• Part D Drugs	1-877-328-9799 or 1-855-964-0556

Please submit these request types via fax using the appropriate Blue Advantage authorization form. Authorization forms are located on the 2021 Blue Advantage Provider Portal under "Resources."

Filing Blue Advantage Claims

- Bill claims with **2021** dates of service to Vantage (**payor ID 72107**). If billed to Lumeris, they will be denied, and you must rebill them to Vantage.
- Bill claims with **2020** dates of service to Lumeris (**payor ID 84555**). If billed to Vantage, they will be denied, and you must rebill them to Lumeris.
- The same electronic payor ID cannot be use for both 2020 and 2021 dates of services.

NEW Provider Portal Features

The Blue Advantage Provider Portal continues to be a one-stop electronic resource for Blue Advantage information. Recently, we added new features to enhance the provider experience.

Providers can now view a member's assigned primary care provider (PCP) and member ID card in the Member Lookup tab. The name of the assigned primary care provider is displayed in the Member information section, as shown below, once the Member Lookup search is complete. To download a PDF version of member ID cards, click "View ID Card," under the Member Information section.

Member ID cards cannot be emailed or faxed to providers due to HIPAA and security precautions.

Member Information	
Member contract and coverage status	
Name:	
DOB:	
Coverage Status:	Active
Primary Care Provider: John Doe	
VIEW CLAIMS	VIEW AUTHS
VIEW ID CARD	

For full details on navigating the portal, download the 2021 Blue Advantage Provider Portal User Guide. A copy of the guide is available on the:

- Blue Advantage Provider Portal (www.BCBSLA.com/ilinkblue, click "Blue Advantage" under the "Other Sites" section and look on the Resources page)
- Blue Advantage Resources page (www.BCBSLA.com/providers, then click, "Go to BA Resources" at the bottom of the page)

Things to Remember When Using the Blue Advantage Provider Portal

- Cookies must be enabled for the portal site in order to log in and access all portal features.
- Google Chrome is the best browser to access the Blue Advantage Provider Portal.
- The portal does include a multi-factor authentication code to be entered when logging in.

To access the Blue Advantage Provider Portal, go to www.BCBSLA.com/ilinkblue, then click "Blue Advantage" under the "Other Sites" section.



MIPS on Blue Advantage Claims

For 2021 claims, providers may begin to see Merit-based Incentive Payment System (MIPS) incentive payments or penalties reflected on weekly payment registers.

MIPS is a quality payment program from the Centers for Medicare & Medicaid Services (CMS). It administers incentives or penalties for the quality of patient care and outcomes. Under MIPS, performance is evaluated across four categories that lead to improved quality and value in our healthcare system:

- Quality
- Cost
- Improvement Activities
- Promoting Interoperability

For dates of service on and after May 1, 2021, Blue Advantage is implementing MIPS for eligible clinicians performing Part B covered professional services.

CMS considers the following clinician types as eligible for the MIPS program:

- physicians
- physician assistants
- nurse practitioners
- clinical nurse specialists
- certified registered nurse anesthetists
- physical therapists
- occupational therapists
- clinical social workers
- clinical psychologists
- certified nurse midwives
- registered dietitians or nutrition professionals
- qualified speech language pathologists
- qualified audiologists

MIPS calculations are determined by CMS. For full details on the CMS program, go to <https://qpp.cms.gov>.

Reimbursement During Credentialing

In accordance with Medicare standards, Blue Advantage providers are not allowed to be reimbursed prior to being credentialed. The date listed on the contract addendum is recognized as the effective date in this network.



Be Aware of COVID-19 Vaccine Fraud

Blue Advantage appreciates the hard work of our network providers to help get people vaccinated. It has come to our attention that scammers are taking advantage of this vulnerable time.

Per the Centers for Medicare & Medicaid Services (CMS), scammers are collecting empty COVID-19 vaccine vials from healthcare facility trash. They fill the vials with water or other liquids, and label them as legitimate COVID-19 vaccines. Then, they try to sell the fake vaccines to healthcare providers. This is of great concern considering the need for vaccine supply to meet patient demand.

For this reason, it is important to securely dispose of empty vaccine vials or other medical waste. Please take steps to prevent people from stealing these items and using them for criminal purposes. Make sure you are obtaining vaccines from authorized distributors. If in doubt, you may contact the Louisiana Department of Health (LDH) for guidance.

We have also received reports of scammers targeting members, claiming they can pay a fee to receive COVID-19 vaccines faster. LDH is managing the vaccine distribution in our state. How soon members can get a vaccine depends on these qualifications:

- Age
- Health status
- Occupation
- Risk of COVID-19

The vaccine is covered at \$0 out-of-pocket on individual and employer health plans, Medicare and Medicaid under the Coronavirus Aid, Relief and Economic Security (CARES) Act. A \$0 coverage for uninsured patients is also included in the CARES Act. No one should be charged to get a COVID-19 vaccine, so please warn your patients to be suspicious of calls, texts, emails, visits or other outreach claiming they can pay to get a vaccine now, especially if this outreach comes from someone they do not know.

Keep in mind that scammers try to trick people by claiming to call on behalf of their healthcare provider. Be transparent with any communication to your patients so they know it is really from you. Encourage them to verify any outreach with your office, particularly if it is someone asking for money or sensitive health information.

You can visit the our YouTube channel to see short videos with our clinical team and others discussing COVID-19, fraud prevention and other health topics. Subscribe to know when new videos are added. You can also connect with us on social media for regular updates. You are welcome to share this information with your patients or through your own websites and social media. For more on what we are doing in response to COVID-19, visit www.BCBSLA.com/covid19.

Thank you for your care and support of our shared customers—your patients, our members—during this critical health crisis.

Who Do I Contact if I Have Questions?

For claims status, member eligibility, benefit verification and care management inquiries that cannot be resolved through the Blue Advantage Provider Portal, Blue Advantage network providers may contact Blue Advantage Customer Service at 1-866-508-7145.

If you are a Quality Blue Primary Care (QBPC) or Quality Blue Value Partnership (QBVP) partner, our Quality Blue teams are accountable for engaging with your practice/entity to share Blue Advantage quality performance updates. Quality Blue questions can be sent to clinicalpartnerships@bcbsla.com. For non-QBPC and QBVP questions specific to the Blue Advantage quality program, you may contact your Provider Relations representative or send an email to provider.relations@bcbsla.com. If you are unsure who your Provider Relations representative is, visit www.BCBSLA.com/providers > Provider Networks > Provider Support.



Provider Pay Disputes

If a provider disagrees with the amount paid on a Blue Advantage claim, they may send a written pay dispute to:

Blue Cross and Blue Shield of
Louisiana/HMO Louisiana, Inc.,
Attn: Provider Disputes -
Blue Advantage
130 DeSiard St, Ste 322

Monroe, LA 71201

Your request should outline the basis for the dispute and should include documents supporting your position.

If you are not receiving our communications,
you may need to update your contact
information...

Do We Have Your Current Contact Information?

Use the Provider Update Request Form to submit updates or corrections to your practice information. The form is available online at www.BCBSLA.com/providers >Resources >Forms.



View this newsletter online at www.BCBSLA.com/ilinkblue, then click on "Blue Advantage" under Other Sites

Blue Advantage Insight

Blue Advantage Insight is a publication to keep our network providers informed on the latest Blue Advantage news. We encourage you to share this newsletter with your staff.

The content in this newsletter is for informational purposes only. Diagnosis, treatment recommendations and the provision of medical care services for Blue Advantage members are the responsibilities of healthcare professionals and facility providers.

What's on the Provider Portal

www.BCBSLA.com/ilinkblue > Blue Advantage

- Member Eligibility
- Claims Inquiry
- Authorization Inquiry
- Forms
- Help Documents
- Helpful Links
- Updated Manual
- Updated Quick Reference Guide

COVID-19 Communications

Visit the COVID-19 section of our Blue Advantage Resources page to view the latest Blue Advantage communications related to the novel coronavirus (COVID-19). Go to www.BCBSLA.com/providers, then click "Go To BA Resources" at the bottom of the page.

Important Contact Information

Authorizations (including Case and Medical Management)

1-866-508-7145, option 3, option 3

Behavioral Health

1-866-508-7145, option 3, option 3

Blue Advantage Customer Service

1-866-508-7145

customerservice@blueadvantage.bcbsla.com

Blue Advantage Provider Portal

1-866-508-7145, option 3, option 2

Provider Credentialing & Data Management

1-800-716-2299, option 2 (provider credentialing)

1-800-716-2299, option 3 (data management)

pcdmstatus@bcbsla.com

Pharmacy

1-800-935-6103/TTY:711

For additional contact information on Blue Advantage services, please refer to our Provider Quick Reference Guide found on the Blue Advantage Provider Portal.

Please share this newsletter with your office staff. This and past newsletters are available on the Blue Advantage Provider Portal (www.BCBSLA.com/ilinkblue > Blue Advantage).