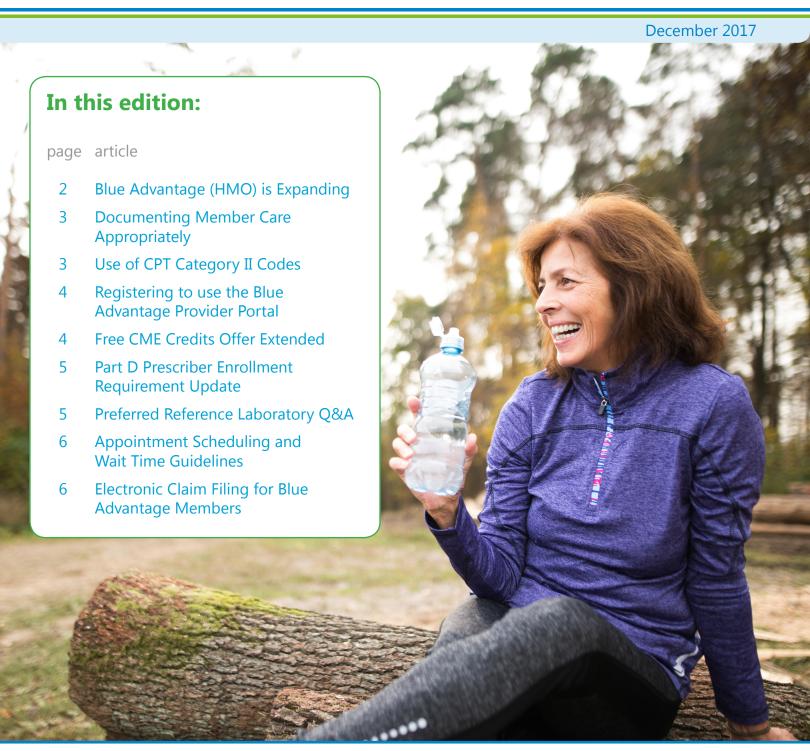
Blue Advantage (HMO)

Insight Newsletter







BLUE Advantage

Blue Advantage (HMO) is Expanding

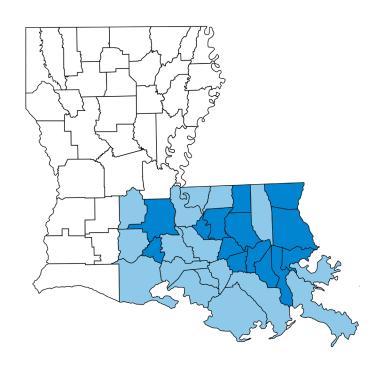
On January 1, 2016, we began offering a new Medicare Advantage provider network—the Blue Advantage (HMO) network—to our members who are 65 years or older in 14 parishes across Louisiana.

By 2030, approximately 20 percent of Louisiana's total population is projected to be age 65 or older. Many of these people are currently or have been insured by Blue Cross and Blue Shield of Louisiana.

As many of our members age into the Medicare market, we want to be able to offer them the same access to top network providers and the full array of coverage that they have come to expect from Blue Cross.

In an effort to meet this demand, for 2018, we are expanding the Blue Advantage network to include 16 additional parishes in Louisiana.

This expansion means the Blue Advantage network will be available in the parishes listed below and highlighted in light blue in the map effective January 1, 2018. Parishes in dark blue represent areas where Blue Advantage is currently available.



Expanding Parishes (January 1, 2018)

- Acadia
- Iberia
- Pointe Coupee
- Tangipahoa

- Assumption
- Iberville
- St. Bernard
- Terrebonne

- East Feliciana
- Lafourche
- St. Martin
- Vermilion

- Evangeline
- Plaquemines
- St. Mary
- · West Feliciana

Existing Parishes

- Ascension
- Lafayette
- St. Charles
- St. John the Baptist Washington

- East Baton Rouge
- Livingston
- St. Helena
- St. Landry
- West Baton Rouge

- Jefferson
- Orleans
- St. James
- St. Tammany



If a provider is located outside of the Blue Advantage 30-parish area, but is a Blue Advantage network provider, can they see Blue Advantage members?

Yes. If you are a Blue Advantage network provider located outside of the 30-parish area, you can see Blue Advantage members.

Documenting Member Care Appropriately

As a Medicare Advantage provider, we are required to provide the Centers for Medicare & Medicaid Services (CMS) with all of our Blue Advantage members' acute and chronic conditions.

A comprehensive exam should be performed on all Blue Advantage members at least once per year.

The member's primary care provider (PCP) should document all conditions (acute and chronic) to the highest level of specificity using the most appropriate evaluation and management (E&M) CPT® codes, ICD-10 codes and, when applicable, CPT II codes to close gaps in care.

We have two options to assist PCPs in this:

Filing Claims for Comprehensive Care Visits

- Bill the appropriate E&M CPT codes that reflect the complexity and level of decision-making for the comprehensive visit.
- The CMS-1500 claim form can accommodate up to 12 ICD-10 codes.
- CPT II codes should also be used on the claim form for comprehensive visits. <u>By using CPT II</u> <u>codes, you reduce the need for medical record</u> <u>reviews</u>. Remember that these codes are not reimbursable by CMS.



Enhanced Encounter Tool

- This web-based tool allows the completion of a comprehensive visit that reviews all of the member's conditions to ensure that we are accurately and fairly predicting health cost expenditures.
- Find the tool in the Accountable Delivery System Platform (ADSP) accessed through the Blue Advantage Provider Portal (www.BCBSLA.com/ilinkblue > Blue Advantage).

Use of CPT Category II Codes

The American Medical Association creates and maintains CPT Category II codes to facilitate data collection about the quality of care rendered by coding certain services. The codes test results that support nationally established performance measures and that have an evidence base as contributing to quality patient care.

CPT II codes describe clinical components that may be typically included in evaluation and management services or other clinical services and do not have a relative value associated with them. These codes may also describe results from clinical laboratory or radiology tests and other procedures, identified processes intended to address patient safety practices, or services reflecting compliance with state or federal law.

CPT II codes are not reimbursable. However, depending on your clearinghouse, you may need to enter \$0.01 in Block 24F of the CMS-1500 claim form, if a charge is required to get the claim to Blue Advantage.

The advantages of assigning CPT II codes include:

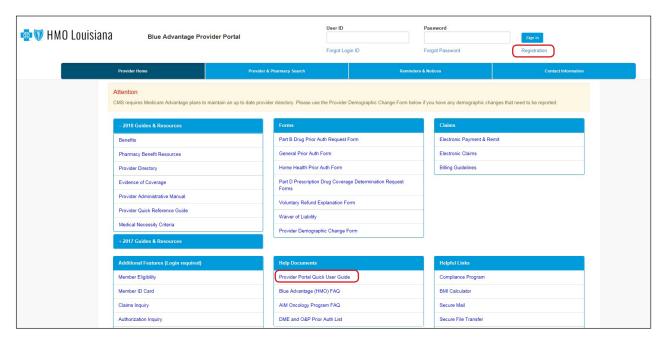
- Lessening the administrative burden of chart review for many Healthcare Effectiveness Data and Information Set (HEDIS) performance measures.
- Enabling organizations to monitor internal performance for key measures throughout the year, rather than once per year as measured by health plans and Pay for Performance.
- Identifying opportunities for improvement so that interventions can be implemented to improve performance during the service year.

Registering to use the Blue Advantage Provider Portal

Without the designation of an administrative representative, Blue Advantage network providers are not able to access the Blue Advantage Provider Portal, an electronic tool that is accessed through iLinkBlue (www.BCBSLA.com/ilinkblue). A separate user sign-on is required for the portal (not your iLinkBlue user ID).

The Blue Advantage Provider Portal offers access to secure information such as eligibility, claims and authorization inquiries, and the Accountable Delivery System Platform (ADSP) for PCPs only. You must register to access this key information that is available only on the provider portal for Blue Advantage providers.

To register for access, visit www.BCBSLA.com/ilinkblue and click on "Blue Advantage" under Other Sites. Once on the Blue Advantage website, click on "Registration" in the top right corner and complete the fields as requested.



For more information, refer to our Provider Portal Quick User Guide. It is available at www.BCBSLA.com/ilinkblue Plue Advantage > Provider Portal Quick User Guide, under Help Documents.

Free CME Credits Offer Extended

We are offering our network physicians FREE continuing medical education (CME) credits directly through the Washington University CME portal.

Please be sure to take advantage of these CME credits. This opportunity is extended to **December 31, 2018**.

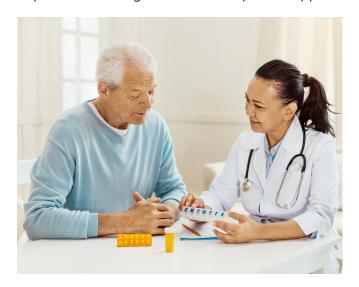
Accessing the Washington University CME Portal

- 1. Go to cmeonline.wustl.edu/bcbsl
- 2. Click "New Account"
- 3. Enter registration information
- 4. Click "Sign Up"

Part D Prescriber Enrollment Requirement Update

If you are a physician or other eligible professional who writes prescriptions for Part D drugs, CMS regulations require you to be enrolled in Medicare as an approved status.

CMS previously announced that the full enforcement date would be delayed to January 1, 2019, and would be implemented using a multifaceted phased approach to enforcement.



Recent communications released by CMS state that there still will be a delay in the full enforcement of the enrollment requirement, but CMS no longer plans to implement a phased approach before January 1, 2019.

Although the full enforcement is January 2019, CMS strongly recommends that Part D drug prescribers enroll now to allow Medicare Administrative Contractors (MACs) that process the applications enough time to enroll all prescribers and ensure prescriptions are not denied. Part D plans will deny a pharmacy claim at the point of sale for drugs prescribed by physicians or other eligible professionals who are not enrolled in Medicare.

For more information, please visit the CMS webpage at www.cms.gov or email providerenrollment@cms.hhs.gov.

Preferred Reference Laboratory Q&A

Who is the preferred reference laboratory for Blue Advantage?

Clinical Pathology Labs (CPL) is the preferred laboratory for the Blue Advantage Network. Always check the online provider directory for a current listing of preferred laboratory providers before referring Blue Advantage members for laboratory services (www.BCBSLA.com/ilinkblue >Blue Advantage >Provider & Pharmacy Search).

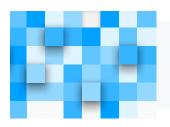
Clinical Pathology Labs (CPL) 1-800-595-1275 www.cpllabs.com

What options are available for outpatient laboratory testing?

Network providers have the following options for laboratory testing:

- Perform laboratory testing in the office in accordance with the level of Clinical Laboratory Improvement Amendments (CLIA) certification.
- Draw laboratory testing in the office and send specimens to CPL as identified in our Provider Directory.
- Send Blue Advantage members to a CPL draw site. To find the nearest draw site, visit www.cpllabs.com.





Reminders

Appointment Scheduling and Wait Time Guidelines

All Blue Advantage network providers must use their best effort to adhere to the following standards for appointment scheduling and patient wait time:

PCP-New Patient	Within 30 days of the Patient's effective date on the PCP's panel – to be initiated by the PCP's office
Routine Care without symptoms	Within 30 days
Non-Routine Care with symptoms	Within five business days or one week
Urgent Care	Within 24 hours
Emergency	Must be available immediately 24 hours per day, seven days per week via direct access or coverage arrangements
OB/GYN	1st and 2nd Trimester within one week 3rd Trimester within three days OB emergency care must be available 24 hours per day, seven days per week
Phone calls to the provider office from the member	Same day; no later than next business day.

- Routine care without symptoms includes physical exams and well-woman exams.
- Non-routine care with symptoms includes rashes, coughs and other non-life-threatening conditions.
- Urgent Care is defined as medical conditions that could result in serious injury or disability if medical attention is not received.
- Emergency is defined as medical situations in which a member would reasonably believe his/her life to be in danger or that permanent disability might result in the condition is not treated.

Practitioners should make every effort to see the patient within an average of one hour from the patient's scheduled appointment time. This includes time spent both in the lobby and the examination room.

Members who are late for their scheduled appointments may not be able to be seen within the hour.

Electronic Claim Filing for Blue Advantage Members



Blue Advantage accepts initial claims submissions electronically through **Change Healthcare** (Blue Advantage payor identification of **84555**). In addition, **84555** is the new payor identification that Change Healthcare has assigned for claims submission and receipt of the 835 ERA. All 27X transactions must be submitted to Change Healthcare using the payor identification **BCLAM**.

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

Blue Advantage (HMO) Insight

Blue Advantage (HMO) 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

- Accountable Delivery System Platform (requires additional login), which includes:
 - Member Eligibility
 - Member ID Card
 - Claims Inquiry
 - Authorization Inquiry
- Forms
- Help Documents
- Claims
- Helpful Links
- Updated Manual (coming January 2018)
- Updated Quick Reference Guide (coming January 2018)

CME Credit Opportunity

The offer of FREE continuing medical education (CME) credits though the Washington University CME portal is extended through 2018. See page 4 for more information.

Important Contact Information

Authorizations (including Case and Medical Management)

1-866-508-7145, option 4, option 4

Behavioral Health

1-877-250-9167 (for customer service and non-facility authorizations)

Blue Advantage Customer Service

1-866-508-7145

customerservice@blueadvantage.bcbsla.com

Blue Advantage Provider Portal

1-866-508-7145

Network Operations

1-800-716-2299, option 3

network.administration@bcbsla.com

Population Health Managers

accountablecareteam@blueadvantage.bcbsla.com

Pharmacy

1-800-935-6103/TTY:1-800-716-3231

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. An electronic copy of this newsletter can be found on the Blue Advantage Provider Portal (www.bcbsla.com/ilinkblue > Blue Advantage).