

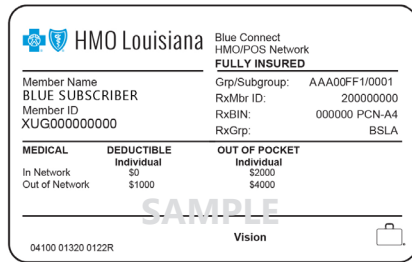


This guide will help you quickly locate key information about the Blue Connect Network, which consists of a select group of physicians, hospitals and other allied providers. Some Blue Connect providers are contracted for limited services only. Please refer Blue Connect members to providers within the network so they receive the highest level of benefits. **Benefit plans in this network vary. Please verify member benefits before rendering services.**

Please also refer to the *Professional Provider Office Manual*, which is available online at www.bcbsla.com/providers >Resources.

Blue Connect Member ID Card

Prefix: XUF, XUG, XUU or XUV



Blue Connect members are identifiable by the HMO Louisiana, Inc. logo and Blue Connect Network name printed on the member ID card. Fully insured Blue Connect members must select a primary care provider.

Tiered benefits apply to members of Blue Connect. More details about this coverage can be found in iLinkBlue (www.bcbsla.com/ilinkblue).

Submitting Claims

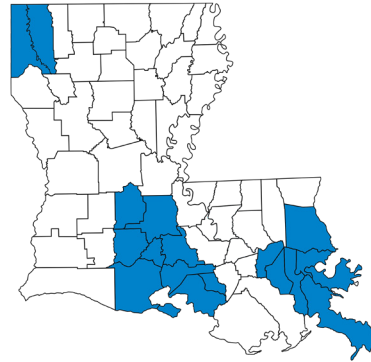
Electronically:

- iLinkBlue (CMS-1500 only)
- Clearinghouses

Hardcopy:

HMO Louisiana
P.O. Box 98029
Baton Rouge, LA 70898-9029

Service areas for the Blue Connect Network



- Acadia
- Bossier
- Caddo
- Evangeline
- Iberia
- Jefferson
- Lafayette
- Orleans
- Plaquemines
- St. Bernard
- St. Charles
- St. John the Baptist
- St. Landry
- St. Martin
- St. Mary
- St. Tammany
- Vermilion

Maternity Admissions

Maternity admissions do not require authorization if the inpatient stay is 48 hours or less for vaginal delivery and 96 hours or less for caesarean section delivery. Member receives the highest level of benefits when services are performed at a Blue Connect facility.

Blue Connect Savings Plus

Blue Connect Savings Plus offers a BlueSaver style benefit plan, but Blue Connect authorization list and network hospital language still applies. (If patient is admitted to an out-of-network hospital, once stabilized, the patient must be moved to a network hospital or a penalty applies.)

Please refer to the **HMO Louisiana, Inc. Network Speed Guide** for more information on the following topics:

- Behavioral Health Claims & Authorizations
- Provider Responsibilities
- PCP Office Responsibilities
- Physician Services

Please refer to the **HMO Louisiana, Inc. Preferred Reference Lab Guide** for information about this network's lab program, including a list of preferred laboratories and a list of codes that may be performed in a CLIA-certified physician's office.

Admitting Privileges

Members receive a lower level of benefits when using a facility that is not in the Blue Connect Network.

Providers—who are required to have admitting privileges—must have admitting privileges to at least one of the following hospitals to be a part of the Blue Connect Network:

New Orleans Area:

- Ochsner Baptist
- Ochsner Medical Center
- Ochsner Medical Center Kenner
- Ochsner Medical Center Northshore
- Ochsner Medical Center Westbank
- Slidell Memorial Hospital
- St. Bernard Parish Hospital
- St. Charles Parish Hospital
- St. Tammany Parish Hospital

Lafayette Area:

- Abbeville General Hospital
- Iberia Medical Center
- Ochsner Abrom Kaplan Memorial Hospital
- Ochsner Acadia General Hospital
- Ochsner Lafayette General Medical Center
- Ochsner St. Martin Hospital
- Ochsner St. Mary
- Ochsner University Hospital & Clinics
- Oil Center Surgical Plaza
- Opelousas General Health System
- Savoy Medical Center

Shreveport Area:

- CHRISTUS Highland Medical Center
- CHRISTUS Physician Group
- Ochsner LSU Health Shreveport

Find a full list of provider support contacts online at

www.bcbsla.com/providers

> Provider Networks

> Provider Support.

Services That Require Prior Authorization

The following services may require HMO Louisiana approval. This list may vary for self-funded groups.

- Air Ambulance – Non-emergency (no benefit without prior authorization)
- Applied Behavior Analysis**
- Arterial Ultrasound*
- Arthroscopy and Open Procedures (shoulder & knee)*
- Bone Growth Stimulator
- Cardiac Rehabilitation
- Cellular Immunotherapy
- Compound Drugs greater than \$250
- Coronary Arteriography*
- CT Scans*
- Day Rehabilitation Programs
- Durable Medical Equipment (greater than \$300)
- Electric & Custom Wheelchairs
- Gene Therapy
- Genetic and Molecular Testing
- Hearing Aids age 18 & older (no benefit without prior authorization)
- Hip Arthroscopy*
- Home Health Care
- Hospice
- Hyperbarics
- Implantable Medical Devices over \$2,000 (including but not limited to defibrillators)
- Infusion Therapy – includes home and facility administration (exception: physician's office, unless the drug to be infused may require authorization)
- Inpatient Hospital Services (except routine maternity stays)**
- Intensive Outpatient Programs**
- Interventional Spine Pain Management*
- Joint Replacement (hip, knee & shoulder)*
- Low-protein Food Products
- Meniscal Allograft Transplantation of the Knee*
- MRI/MRA*
- Nuclear Cardiology*
- Oral Surgery (not required when performed in a physician's office)
- Orthotic Devices greater than \$300
- Partial Hospitalization Programs**
- Percutaneous Coronary Interventions such as Coronary Stents and Balloon Angioplasty*
- PET Scans*
- Certain Prescription Drugs – the complete list of drugs requiring an authorization is available online at www.bcbsla.com/providers >Pharmacy
- Private Duty Nursing
- Prosthetic Appliances
- Pulmonary Rehabilitation
- Radiation Therapy for Oncology*
- Residential Treatment Centers
- Resting Transthoracic Echocardiography*
- Sleep Studies, except for those performed as a home sleep study
- Spine Surgery*
- Stress Echocardiography*
- Surgical Treatment of Erectile Dysfunction (including penile implants) (if benefits available)
- Temporomandibular Joint Syndrome (TMJ) Surgical Treatment
- Transesophageal Echocardiography*
- Transplant Evaluation & Transplants
- Treatment of Osteochondral Defects*
- Vacuum Assisted Wound Closure Therapy

To Request Prior Authorization

Blue Cross does not accept authorization requests via phone or fax with the exception of transplants, dental services covered under medical and most out-of-state services. Providers must submit prior authorization requests, including new and extension authorizations, through our online BCBSLA Authorizations application. This application is available on iLinkBlue (www.bcbsla.com/ilinkblue), located under the "Authorizations" menu option. Full details are in our provider manuals, available at www.bcbsla.com/providers, then click on "Resources."

* High-tech imaging & utilization management program services are authorized through the Carelon **ProviderPortal**_{SM} by clicking the "Carelon Authorizations" link.

** Behavioral health services are authorized through the Lucet WebPass Portal by clicking the "Behavioral Health Authorizations" link.