




This convenient guide will help you quickly locate key information about the Community Blue Network. The Community Blue Network consists of a select group of physicians, hospitals and other allied providers. Some Community Blue providers are contracted for limited services only. Please refer Community Blue members to Community Blue Network providers so they receive the highest level of benefits.

Additional information is available in the *HMO Louisiana, Inc. Provider Manual* and the *Professional Provider Office Manual*; both are online at www.BCBSLA.com/providers > Resources.

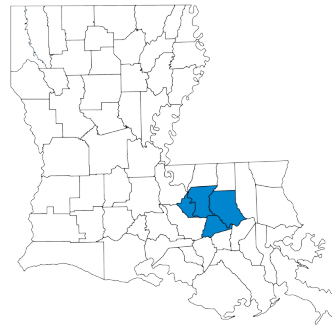
Sample Community Blue Member ID Card

Prefix: XUD, XUJ or XUT

		Community Blue HMO/POS Network Fully Insured
Member Name		
Member ID		
[Advantage Plus Dental Network]		
Grp/Subgroup	12345XX6/000	
RxMbr ID	123456789	
RxBIN	003858	RxPCN-A4
RxGrp	BSLA	
BC PLAN	170	BS 670
04100 01320 0118R		
 		

Community Blue members are identifiable by the HMO Louisiana, Inc. logo and Community Blue Network name printed on the member ID card.

Service areas for the Community Blue Network:



Baton Rouge Area

- Ascension
- East Baton Rouge
- Livingston
- West Baton Rouge

Services That Require Authorization Prior to Rendering Services

The following services may require HMO Louisiana approval. This list may vary for self-funded groups. Please always verify the Community Blue member's eligibility, benefits and limitations prior to providing services. To do this, use iLinkBlue (www.BCBSLA.com/ilinkblue).

- Air Ambulance – Non-Emergency
- Applied Behavior Analysis
- Arterial Ultrasound*
- Arthroscopy and Open Procedures (Shoulder & Knee)*
- Bone Growth Stimulator
- Cardiac Rehabilitation
- Compound Drugs greater than \$250
- Coronary Arteriography*
- CT Scans*
- Day Rehabilitation Programs
- DME greater than \$300
- Electric & Custom Wheelchairs
- Genetic Testing
- Hip Arthroscopy*
- Home Health Care
- Hospice
- Hyperbarics
- Implantable Medical Devices over \$2,000 (including but not limited to defibrillators and insulin pumps)
- 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 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
- Radiation Therapy for Oncology*
- Residential Treatment Centers
- Resting Transthoracic Echocardiography*
- Sleep Studies (except those performed as a home sleep study)
- Spine Surgery*
- Stress Echocardiography*
- Temporomandibular Joint Syndrome (TMJ) surgical treatment
- Transesophageal Echocardiography*
- Transplant Evaluations & Transplants
- Treatment of Osteochondral Defects*
- Vacuum Assisted Wound Closure Therapy

*Request for prior authorization for these services may be completed online through the AIM **ProviderPortal_{SM}** on iLinkBlue.

Utilization Management Programs

HMO Louisiana has several utilization management programs that require prior authorization for select elective services. AIM Specialty Health[®] (AIM), an independent specialty benefits management company, serves as our authorization manager for these services:

- Cardiology
- High-tech Imaging
- Musculoskeletal (MSK)
 - Interventional Pain Management
 - Joint Surgery
 - Spine Surgery
- Radiation Oncology

Authorization requests may be completed online using the AIM **ProviderPortal**_{SM} accessed through iLinkBlue.

AIM clinical appropriateness guidelines are available at www.aimspecialtyhealth.com.

Additional information can be found in the *Professional Provider Office Manual*.

Behavioral Health Claims & Authorizations

Claims should be submitted to Blue Cross and Blue Shield of Louisiana for processing.

For behavioral health services requiring an authorization, Blue Cross has partnered with New Directions to manage the authorization process. Request authorization using the Behavioral Health Authorizations tool, available under the "Authorizations" section of iLinkBlue, or call New Directions at 1-800-991-5638.

Additional information on behavioral health authorizations, claims and member benefits can be found in the *Behavioral Health Speed Guide*, available at www.BCBSLA.com/providers >Resources.

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. The member receives the highest level of benefits when services are performed at a Community Blue facility.

In-office Lab List and Preferred Lab Program

Community Blue network physicians may ONLY perform the following selection of lab tests (CPT[®] codes shown) in their CLIA-certified offices, which may be covered under the member's office copayment.

80305	81015	82948	84030	85018	86490	87276	87804	88333
80306	81025	82951	84112	85025	86510	87430	87807	88334
80307	82044	82952	84132	85027	86580	87480	87880	88341
80320	82247	82962	84437	85032	86756	87490	88311	88342
80321	82270	83013	84702	85610	87172	87491	88312	89190
80322	82272	83014	84830	85651	87177	87502	88313	89220
81000	82274	83026	85007	85652	87205	87510	88314	89230
81001	82565	83036	85008	86308	87210	87590	88329	
81002	82570	83037	85013	86403	87220	87591	88331	
81003	82947	83518	85014	86485	87275	87660	88332	

Preferred Reference Labs

Physicians who do not perform any of the tests above in their office must send Community Blue members to one of the following preferred reference labs and may bill for the specimen collection handling fee:

- **Clinical Pathology Labs** — www.cpllabs.com or 1-800-633-4757
- **LabCorp** — www.labcorp.com or 1-800-621-8037
- **Quest Diagnostics** — www.questdiagnostics.com or 1-866-MYQUEST (1-866-697-8378)

Handling Fee

To compensate physicians for their time and effort associated with handling lab tests sent to a preferred reference lab, physicians will be paid a handling fee per member/per visit for tests. **To be paid the handling fee, you must bill CPT code 36415 or 99000.**

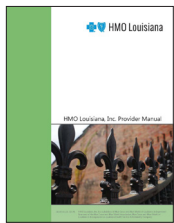
Please note: Physicians are not eligible to bill for the handling fee when they refer lab work to labs other than our preferred reference labs. Physicians will not be paid for the handling fee in addition to their fee-for-service reimbursement for lab tests performed in their offices.

Provider Responsibilities

1. Collect only the copayment, coinsurance and/or deductible amount for covered services.
2. Obtain prior authorization for any services requiring authorization (see the flip side of this speed guide).
3. Accept the Community Blue allowable charge plus the member's applicable deductible, coinsurance and/or copayment as payment in full for covered services.
4. To refer Community Blue members to Community Blue providers, use our online provider directory available at www.BCBSLA.com >Find a Doctor or Drug. Enter the member's prefix found on the member ID card or select "Community Blue HMO/POS" option.
5. File claims for all Community Blue patients.

PCP Office Responsibilities

Provide 24-hour access to medical care for members via call coverage with another physician as well as answering service or pager access to the PCP. It is the PCP's responsibility to make arrangements with the covering physician to ensure that the covering physician accepts the Community Blue allowable charge as payment in full for covered services.



More information on Community Blue is in our *HMO Louisiana, Inc. Provider Manual*, available online at www.BCBSLA.com/providers, then click on "Resources."

iLinkBlue

Use iLinkBlue, our secure, online self-service provider tool. With iLinkBlue, providers can directly access:

- Eligibility
- Benefits
- Allowable Charges
- Claims Research
- Imaging Authorizations
- Payment Information (including remittance advices)
- Medical Policies
- Manuals
- APTC Grace Period Information
- And more

For information on how to access iLinkBlue, go to www.BCBSLA.com/providers >Electronic Services.

www.BCBSLA.com/ilinkblue

Physician Services

Different copayment amounts apply to primary care physicians (PCPs), specialists, urgent care clinics and hospital stays.

The following Community Blue network provider types should collect the PCP copayment:

- Physicians (*family or general practice, geriatric, internal medicine & pediatric*)
- Chiropractors
- Optometrists
- Retail Health Clinics
- Physician Assistants
- Nurse Practitioners

Admitting Privileges

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

Providers—who are required to have admitting privileges—must have admitting privileges to [Baton Rouge General](#) to be a part of the Community Blue network.

Submitting claims

Electronically:

- iLinkBlue (CMS-1500 only)
- Clearinghouses

Hardcopy:

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

Provider Resources

Always have your NPI or Community Blue provider number available when calling.

Customer Care Center

1-800-922-8866

- Option 1 - Benefits
- Option 2 - Claims
- Option 3 - Authorizations

- Option 4 - Out-of-State
- Option 5 - Payment Register Fax
- Option 6 - None of the Above

Network Administration

1-800-716-2299

- Option 1 - Network Development network.development@bcbsla.com
- Option 2 - Provider Credentialing
- Option 3 - Data Management
- Option 4 - Provider Relations provider.relations@bcbsla.com
- Option 5 - Provider Identity Management PIMTeam@bcbsla.com

iLinkBlue, Electronic Claims & Clearinghouse

1-800-216-BLUE (1-800-216-2583) or EDIServices@bcbsla.com

Fraud & Abuse Hotline

1-800-392-9249

Call 24/7. You can remain anonymous. All reports are confidential.

Member Benefits

Call number on the member ID card.

Case & Disease Management

1-800-317-2299

AIM Specialty Health (AIM)

1-866-455-8416

New Directions

1-800-991-5638