

# BLUE REVIEW

For Contracting Institutional and Professional Providers

March 2008

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## Thank you for participating!

The results from our 2007 Provider Communications Survey are in. You told us what we are doing right, as well as what we need to do to make things better in this newsletter and on our Provider Web site. We appreciate the participation of those physicians, clinical and administrative staff who took the time to respond.

A significant number of participants also chose to include additional feedback in the Comments section of the survey. In some cases, providers requested special assistance, but did not provide a contact name, phone number, or e-mail address. As the survey was anonymous, requests for assistance will need to be sent via e-mail at [blureview@bcbsil.com](mailto:blureview@bcbsil.com).

Complete results and our plans for improvement will be outlined in our next *Blue Review*. We value your input and look forward to enhancing our provider communications to exceed your expectations in 2008!

## HCSC Receives National Recognition for Employee Wellness Initiatives

The Wellness Councils of America (WELCOA), one of the nation's premier resources for work site wellness, has honored Health Care Service Corporation (HCSC), a Mutual Legal Reserve Company which operates Blue Cross and Blue Shield of Illinois, with the 2007 Gold Level Well Workplace Award.

One of HCSC's key commitments is to promote the health and wellness of our members and communities – including our own employees. WELCOA, which conducts a rigorous evaluation of the quality of corporate health promotion programs, determined that our employee wellness efforts permeate all levels of our company and that those efforts also have resulted in behavior changes that improved employees' health.

HCSC provides many programs and tools to help employees become or remain healthy. In 2007 we offered flu shots, cholesterol screenings, and weight loss and exercise tips through online programs, such as Ask-a-Nurse, Ask-a-Dietician, Ask-a-Life Coach and Ask-a-Trainer. A corporate smoking cessation program was introduced and employees were provided with the tools needed to quit using tobacco. Also, we launched a new Wellness Rewards Program, which lets benefits-eligible employees earn up to \$200 each year for taking specific steps to improve their health. A new three-year plan is being developed to further enhance our wellness programs and promote employee health.





## Do You Know How To Get Connected?

Join the growing number of providers who use electronic solutions for faster service.

NDAS Online is our fast, convenient, and free online resource to help you with a variety of every day tasks.

Current features allow you to:

- Verify Member Eligibility
- View Basic Benefit Information, and
- Check Claim Status

To sign up, go to our Web site at:

[www.bcbsil.com/providers](http://www.bcbsil.com/providers) and click on NEBO/NDAS Online under the Electronic Commerce section. Complete the NDAS Online Enrollment Packet, and fax it back to us as instructed.

Once all information is processed and it has been determined that you meet the system requirements, installation and training materials will be mailed to you. Processing time is approximately 5-10 business days.

NOTE: To be eligible for NDAS Online you must have a valid BCBSIL provider number and a National Provider Identifier (NPI). For more information regarding how to obtain your NPI, just click on the NPI logo on our Provider Web site.

## We're Encouraging our Members to Make Informed Health Care Decisions Members Manage their Health Care through BlueEdge

Over 4 years ago, BCBSIL launched BlueEdge, our Consumer Driven Health Plan (CDHP) product. Enrollment has increased to over 670,000 members, as more consumers discover that BlueEdge gives them flexibility and freedom to select any PPO provider and to choose how their health care dollars are spent.

What distinguishes BlueEdge from other PPO plans?

### Preventive care and wellness visits

These services are covered at 100% in-network even before a deductible is taken. Preventive wellness includes:

1. Physicals and routine check-ups
2. Diagnostic tests: routine lab, routine x-rays and mammograms
3. Well child care and immunizations

BlueEdge PPO benefits are the same as standard PPO benefits and begin after the deductible is met.

### Spending Accounts

The following funds can be used to pay for health care expenses, with eligible expenses counting toward the member's deductible:

**Health Care Account (HCA)** – In an HCA, employers set aside a specific amount of money for the member each benefit year. When the member receives care for covered services, HCA dollars are used to pay for them. Eligible expenses count toward their annual deductible. Unspent funds roll over year to year as long as the member remains in the plan. If the member changes health plans, any available funds return to their employer.

### Debit Cards

Members in certain employer groups have stand-alone health care debit cards. Member cards will display the nationally recognized Blue Cross and Blue Shield logos along with a bank logo. Copayments and other out-of-pocket expenses can be deducted from their HSA.

### Online decision resources

Blue Access for Members is a BCBSIL online service tool that allows members to review the status of their HCA, including current balance and payments made to date. Members may check the status of a claim, view the EOB and confirm who is covered



**Health Savings Account (HSA)** – HSAs offer members tax and savings benefits. Deposits into this account can be made by the member, their employer or both. Funds can be used to pay for qualified expenses, or the member can leave the funds untouched to work as a savings vehicle for future investments. This account belongs to the member, so if they leave their current employer or change health plans, the member keeps the funds.

under their plan. Members also can track health care information through health and wellness tools. This online tool helps us communicate with members and grants the member access anytime and anywhere to their health information on a single Web site.

Employers and consumers continue to be asked to share more of the responsibility for rising health care costs. This is leading to an expansion of CDHP offerings and options. We are confident that BlueEdge PPO is the product of the future, and a solution for meeting those needs.

## Are you an ancillary provider?

BCBSIL understands the different needs of ancillary type providers. That's why we have dedicated Network Consultants who focus specifically on the services provided by Skilled Nursing Facilities, Home Health Agencies, Hospice, Home Infusion Therapy, DME, Orthotics and Prosthetics, Dialysis Centers, and Private Duty Nursing agencies.

### Meet your Ancillary Network Consultants:

The Ancillary Network Consultants for Illinois are Sherry Heise Jaskolka (312-653-7652) and Elaine Williams (312-653-4305). Sherry and Elaine serve as liaisons to ancillary providers throughout the state of Illinois and northwest Indiana and specialize in ancillary provider contracts for HMO, PPO and BlueChoice POS. These consultants are available to meet with your staff and address your special needs related to BCBSIL policies and procedures, billing, and contractual issues.

You may also direct your requests and inquiries to our ancillary e-mail box at [ancillarynetworks@bcbsil.com](mailto:ancillarynetworks@bcbsil.com), or call 1-312-653-4820.



## Special contracting tips for DME and Orthotics/Prosthetics providers

If you are a **DME provider** who is licensed in Illinois or Indiana as a Home Medical Equipment Services Supplier, and your local Illinois or northwest Indiana facility is accredited by a nationally recognized accrediting body (Joint Commission, ACHC, or CHAP accepted) you qualify for a BCBSIL PPO contract.

**Orthotic and Prosthetic facilities** must be accredited by the American Board for Certification in Orthotics and Prosthetics (ABC) or Board for Certification in Pedorthics (BCP), as applicable, and have an Illinois licensed orthotist, prosthetist or pedorthist with ABC certification on staff in order to qualify for a PPO contract.

DME and Orthotics/Prosthetics providers must be prepared to submit all claims electronically. Providers not

currently submitting electronic claims may access and complete the Electronic Trading Partner Agreement located on our Web site at [www.bcbsil.com/provider/](http://www.bcbsil.com/provider/), or call our E-Commerce Center at 1-800-746-4614 for additional information. DME and Orthotic/Prosthetic contracts for the PPO network may be requested by sending an e-mail to [ancillarynetworks@bcbsil.com](mailto:ancillarynetworks@bcbsil.com).

Contracts must be completed and submitted with a copy of your Illinois or northwest Indiana facility Accreditation Certificate. **DME providers** must also submit a copy of their State Supplier license; and **Orthotics/Prosthetics providers** must also submit the orthotist/prosthetist/pedorthist practitioner's license and certification. Contracts without the appropriate attached credentials will be returned.

## BlueCard®:

### Remember these Quick Tips for Faster Service

Our BlueCard Program allows Blue Cross and Blue Shield (BCBS) plan members to obtain health care services while traveling or living in another plan's service area. That means BCBS members visiting Illinois from out of state can receive the benefits of the BCBS plan listed on their insurance card, and access our local BCBSIL provider network and savings.

### Cut out and post this article in your office for easy access

#### When Verifying Eligibility and Benefits

1. Ask members for the current member ID card.
2. Verify the member's ID number. The ID number begins with the three letter alpha prefix followed by a combination of 6-14 letters/numbers.
3. Check eligibility and benefits electronically through NDAS Online or by calling the BlueCard Eligibility Line at 1-800-676-BLUE (2583).
4. If eligibility and benefits are not available on the Interactive Voice Response System (IVR), you may speak with a Provider Telecommunications Center (PTC) Representative. The IVR will prompt you for this function.
5. Verify the member's co-payment amount before processing payment.

#### When Submitting Claims

1. Submit all Blue plan claims to BCBSIL.\*
2. Submit claims with valid alpha prefixes—claims with incorrect or missing member ID numbers cannot be filed correctly.
3. If there is more than one payer and a Blue Plan is primary, include Other Party Liability (OPL) information on the claim.
4. Do not submit duplicate claims.

\*Providers in Border States may have different requirements.

#### When Checking Claim Status

1. Submit an electronic inquiry through NDAS Online, or
2. Call our IVR at 1-800-972-8088.

#### Need to Contact Us?

Remember: We are your "one-stop shop" for all BlueCard claim inquiries.

- Submit electronic inquiries to BCBSIL via NDAS Online, or
- Contact your Provider Network Consultant

Note: To locate the name of your assigned Provider Network Consultant, visit our Web site at [www.bcbsil.com/provider](http://www.bcbsil.com/provider), and click on "Provider Network Consultant List" in the Provider Library section.



## View Managed Care Updates Online

### HMO and BlueChoice Updated Policies and Procedures on Web

On a monthly basis, we post updated policies and procedures on our Web site under "Updates." Go to [www.bcbsil.com/provider](http://www.bcbsil.com/provider) to view the updated policies.

### HMO and BlueChoice Appointment/ Reappointment Report on Web

On a monthly basis, we post a report of the Appointed and Reappointed providers on our Web site. To access this report, go to [www.bcbsil.com/provider](http://www.bcbsil.com/provider). Select "Appointed/Reappointed PCPs/PSPs" under the Credentialing/Contracting section. The cumulative data is updated by the third Wednesday of each month.

### BlueChoice Updated Depart List

A listing of all specialists no longer participating in the network for the BlueChoice product can be found at [www.bcbsil.com/provider/securedpage.htm](http://www.bcbsil.com/provider/securedpage.htm).

Note: You can find participating specialists for the BlueChoice product on our Provider Finder® at [www.bcbsil.com](http://www.bcbsil.com).

## Medical Policy Disclosure Statement

New or revised Medical Policies will be posted in the "Pending Policies" section of the Medical Policy site on the BCBSIL Web site. The new or revised policies will be available on the first day of each month. The specific effective or implementation date will be noted for each policy that is posted.

To review these policies, visit our Web site at [www.bcbsil.com/provider](http://www.bcbsil.com/provider) and select "Medical Policies." After reading the Medical Policies Disclaimer, click on "I Agree." The policies that are awaiting implementation can be found in the "Pending Policies" section of the Medical Policy site.

## "Seasons of Life"

will help members through difficult times

At BCBSIL, we're always looking for ways to align our values with our products and services, and go the extra mile for our members. In keeping with this high standard, we will soon be introducing a new program called Seasons of Life. This program is designed to help our members and their families with their insurance needs after the death of a loved one.

The program is intended to assist BCBSIL members in resolving health care financial issues, filing claims, and navigating the

health care system during a difficult life experience. Seasons of Life will hopefully help reduce the stress connected with health care financial issues, which will allow employees and their families the time they need to cope with their loss.

Since piloting the Seasons of Life program in late 2006, we have received many heartwarming thank you remarks from those receiving this new program. Watch for more details as we put this program into motion for our members later this year.

## You're Invited!

Register online for our provider workshops

The Provider Affairs Education Team at BCBSIL offers a variety of complimentary workshops to help keep you informed.

Here is a partial listing of workshop highlights:

- Consumer Driven Health Plan (CDHP)
- e-Solutions enhancements
- Web site tutorial information
- Provider Review/Appeals
- BlueCard® process improvements
- National Provider Identifier (NPI) Transition Plan

Visit our Web site at [www.bcbsil.com/provider/training.htm](http://www.bcbsil.com/provider/training.htm) to view the agenda and location, and to register for any workshops you are interested in attending.

## Upcoming workshops include:

Workshop: BlueChoice Workshop  
Date: March 26, 2008  
Location: BCBSIL

Workshop: HMO Spring Administrative Forum  
Date: April 9, 2008  
Location: BCBSIL

Workshop: Labor Group Webinar  
Date: April 16, 2008  
Location: Online

Workshop: Managed Care Roundtable  
Date: April 16, 2008  
Location: BCBSIL

Workshop: Ancillary Workshop - DME  
Date: April 24, 2008  
Location: Walgreens Home Care, Tinley Park, Illinois

Workshop: Blue News You Can Use  
Date: April 30, 2008  
Location: LaRabida Children's Hospital, Chicago, Illinois

Workshop: Ancillary Workshop - DME  
Date: May 15, 2008  
Location: Apria Health Care, Schaumburg, Illinois

Workshop: Ancillary Workshop - DME  
Date: June 4, 2008  
Location: Memorial Hospital, Springfield, Illinois

Workshop: Ancillary Workshop - CHC/HIT/Hospice  
Date: June 10, 2008  
Location: Apria Health Care, Schaumburg, Illinois

Workshop: New PPO Provider Workshop  
Date: June 12, 2008  
Location: Little Company of Mary, Evergreen Park, Illinois

## Pharmacy Program Updates



### Zyrtec Available Over the Counter

The FDA has recently granted over the counter drug status to the tablet, chewable tablet, and syrup formulations of Zyrtec (cetirizine) and the extended-release tablet formulation of Zyrtec-D (cetirizine/pseudoephedrine). Cetirizine is a second-generation (low-sedating) antihistamine for the treatment of allergies.

Non-prescription Zyrtec (cetirizine) and Zyrtec-D (cetirizine/pseudoephedrine) are now available over the counter. Since the drug is available over the counter it will be excluded from coverage under the pharmacy benefit. Members will no longer need a prescription from their physician to obtain this medication.

### New Generics for Fosamax, Protonix, and Altace

Fosamax, a highly utilized medication for the treatment of osteoporosis, now has a generic available named alendronate. Alendronate is the first generic in a class of drugs called bisphosphonates, used to prevent bone loss in osteoporosis. Other drugs in the bisphosphonate category include: Boniva and Actonel. Another version of Fosamax called Fosamax Plus D does not have a generic available at this time.

Pantoprazole is the new generic for the drug Protonix. Pantoprazole is a drug in a class of drugs known as proton pump inhibitors (PPIs) used to treat ulcers and heartburn. There is one other generic in this drug class—omeprazole. Other brand name drugs in this drug class include Nexium, Prevacid and Aciphex. There has been ongoing litigation between the brand name and generic manufacturers which could result in the generic being removed from the market. If that should happen we will provide further details.

Altace is now available generically. The generic product, ramipril, was launched in December 2007 and belongs to a class of medications known as angiotensin-converting enzyme (ACE) inhibitors indicated for the treatment of high blood pressure and the reduction of cardiovascular risks. It is an alternative to brands such as Accupril (quinapril), Aceon (perindopril), Capoten (captopril), Lotensin (benazepril), Mavik (trandolapril), Monopril (fosinopril), Prinivil (lisinopril), Univas (moexipril), Vasotec (enalapril), and Zestril (lisinopril). The use of generic medications as first-line therapy is encouraged, whenever appropriate.



## NPI Corner

### Electronic Commerce – Online Resources

Did you know that visiting the Electronic Commerce section of our Provider Web site will provide you with answers to many common questions about electronic claims filing? In order to obtain quick and up-to-date information, visit [www.bcbsil.com/provider](http://www.bcbsil.com/provider). Click on “Electronic Commerce” in the top navigation menu, then “Alerts” on the side menu.

The Alerts page is used as a notification tool to communicate when EDI Transaction issues occur and how these issues were resolved. We encourage you to visit the Alerts page often throughout the NPI transition for the latest news and Web-based applications you need to better service our members and your patients.

### Remember to include your TIN on all claims!

The NPI does not replace your Federal Taxpayer Identification Number (TIN), which must continue to be used in standard transactions for tax reporting purposes. Your TIN (EIN, SSN or ITIN) is required by BCBSIL as a secondary identifier on all electronic and paper claims. Electronic edits are in place to enforce this requirement. Paper claims may not be rejected but may incur processing errors and significant delays if submitted without this important information.

Avoid processing errors and claims rejection—continue to use your TIN on all claims submitted to BCBSIL.

## Medicare Part D Pharmacy Updates

BCBSIL has a Medicare Prescription Drug plan in Illinois—Blue MedicareRX. In an effort to inform our participating providers of formulary changes that affect Medicare beneficiaries, over the past six months we have been providing you with Medicare Part D Pharmacy Updates in the *Blue Review*. These monthly articles can now be found on our Web site at [www.bcbsil.com/providers](http://www.bcbsil.com/providers). Click on Medicare Part D Updates in the Pharmacy Management section.

The following new articles are now available on the Web:

- January, 2008: Strategies to Avoid Medicare’s Part D Coverage Gap
- February, 2008: FDA issues updated safety warning regarding the inappropriate use of fentanyl transdermal (DURAGESIC) patches!

## Urgent Care Billing Clarification

Note: This article is a clarification on the "Urgent Care Billing" article that was printed in the February 2008 Blue Review.

As a professional provider billing for services rendered in an Urgent Care setting (POS 20), BCBSIL requires the use of -26 Modifier. This modifier denotes the professional service only. The Urgent Care/Emergency facility provides and bills the technical component of the services.

Please use -26 Modifier in the first modifier position on the CMS-1500 claim form. This will ensure you are paid correctly for professional services rendered.

For electronic claims submission, use -26 Modifier in the following fields/data elements:

4010A1 837P  
Loop 2400 SVC101  
3 (Procedure Modifier 1)

T0301  
FAO record, field 10 positions  
65-66 (HCPCS Modifier 1)

**Important note: Failure to add -26 Modifier after this notice will be considered fraudulent billing practices and any overpayments will be recouped from future payments**

## Fairness In Contracting

In an effort to comply with Fairness In Contracting Legislation and keep our contracting providers informed, BCBSIL has designated a column in the *Blue Review* to notify you of any changes to the physician fee schedules. Be sure to review this area each month.

Effective February 5, 2008, the fee for code S0613 was updated.

Effective February 15, 2008, the fee for code 90649 was updated.

Providers can request fees by downloading the Fee Schedule Request Form at [www.bcbsil.com/provider/forms.htm](http://www.bcbsil.com/provider/forms.htm).

## Our Position on "Concierge" Medicine

BCBSIL is witnessing an increase in the number of physicians who have changed their practice model to that of a concierge, or boutique, practice. In this model, patients are charged a fee, typically annually, in exchange for "premium service." Often the fee is charged for administrative reasons, such as filling out forms or to offset rising malpractice insurance premiums.

The methodology utilized by BCBSIL in its fee-for-service reimbursement is based on the Centers for Medicare and Medicaid Services (CMS) Resource-Based Relative Value Scale (RBRVS). Specifically, the company's payment incorporates the CMS Relative Value Units (RVUs) which reflect the physician's work, practice expenses and professional liability insurance costs. These RVU components are developed by the American Medical Association and include input from major medical specialty societies.

BCBSIL's fee-for-service reimbursement rates take into account all of the factors mentioned above.

Contracted providers who are charging these fees will be sent written notice advising them that BCBS members must be excluded from the fees in order to prevent the termination of their BCBSIL PPO and/or BlueChoice contracts.



## Reminder: HCPCS Code S9088

In Illinois, a true Urgent Care Facility is one that is affiliated with a hospital. Urgent care services that are not performed at an affiliated hospital center should be consistent with services rendered in a physician's office. Claims should be filed on a CMS-1500 claim form (electronically or hardcopy) using CPT-4/HCPCS codes to identify services performed. HCPCS code S9088 is an "add-on" code that is informational only and identifies the setting or place of treatment where the urgent care service(s) took place. BCBSIL does not reimburse separately for "facility" or "treatment room" fees in these settings, as this is included in the overhead component of the professional service(s). S9088 will not be separately reimbursed, and the member cannot be billed for these charges, which is consistent with our policies regarding services that are an integral part of another service.

# Recognizing You on *National Doctor's Day*

March 30, 2008



## **A message from Kim Reed, M.D., Senior Medical Director**

March 30th is National Doctor's Day – the day set aside each year to honor the thousands of medical professionals who work tirelessly to bring healing and comfort to each of us and our families.

The first Doctor's Day observance dates back 75 years ago when the Barrow County Alliance in Winder, Georgia, adopted a resolution seeking to pay lasting tribute to doctors. March 30th was selected because it is the anniversary of the first administration of general anesthesia by Dr. Crawford W. Long in Barrow County. In 1990, President George H. Bush signed a resolution designating March 30th as National Doctor's Day.

At Blue Cross and Blue Shield of Illinois, we recognize the vital role our physician network plays in carrying out our mission of promoting the health and wellness of our members and communities through accessible, cost-effective, quality health care. We value our strong relationship with you and appreciate your enormous contribution to the health and welfare of those we serve.

We extend a special "Thank you!" to all of our physicians, and trust that you know how much we appreciate all you do to offer our members the best service and care.

*"BCBSIL is proud to congratulate all of our network physicians as the country honors them through National Doctor's Day. We know that our members choose BCBSIL as their trusted health plan because of the doctors in our contracting provider networks."*

*–Gail Larsen, Divisional Vice President Provider Relations*

*"Congratulations to all of our providers for making a difference in so many people's lives. The Provider Telecommunications Center is proud to recognize our contracted providers and considers it an honor to work with such a talented group of individuals."*

*–Scott Alexander, Senior Director  
Provider Telecommunications Center (PTC)*

*"We would like to recognize our contracting providers on this honorable day. We appreciate that you are always willing to travel to our educational workshops throughout the community and the state of Illinois to stay abreast of developments relating to doing business with BCBSIL."*

*Thank you for your commitment and dedication in promoting wellness. This ultimately has a positive impact on our members and your patients. The Education Team honors you on this special day and throughout the year."*

*–The Provider Affairs Education Team*

Thank you for your participation in our network!

*Gracias*

*Tack*

*Merci*



BCBSIL celebrates

# National Doctor's Day

We recognize you as our customers and applaud your efforts to deliver the very best in health care services to our members and your patients. We value your relationship with BCBSIL, as your participation truly enhances our contracting provider network.

**Thank you for joining us in our initiative to Experience. Wellness. Everywhere.<sup>SM</sup>**

Look inside for our special message to you acknowledging this special day.

*Blue Review* is a monthly newsletter published for Institutional and Professional Providers contracting with Blue Cross and Blue Shield of Illinois. We encourage you to share the content of this newsletter with your staff. The *Blue Review* is located on our Web site at [www.bcbsil.com/provider](http://www.bcbsil.com/provider).

The editors and staff of the *Blue Review* welcome letters to the editor. Address letters to:

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For Contracting Institutional and Professional Providers

# BLUE REVIEW

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