

## **Please Read: Important Provider Information on New Wellness Initiatives for Federal Employees under the Service Benefit Plan**

### **What are the programs?**

Beginning 1/1/2010, the BlueCross and BlueShield Service Benefit Plan will reward members when they complete either the adult Blue Health Assessment or a child's BMI assessment. The intent of these programs is to encourage wellness and prevention and aim to remove barriers to care.

The member reward will be enhanced benefits:

- If an adult member completes the Blue Health Assessment, our Health Risk Assessment, the copayment for his/her subsequent annual physical examination or an individual preventive counseling visit will be waived. The member will receive a certificate that entitles them to a preventive visit at no charge and the member will be directed to present the certificate to the physician at time of care. The member must complete the Blue Health Assessment and present a certificate of completion in order for the provider to waive the copayment for the visit. (Following this article is a copy of the certificate for your reference.)
- The second incentive targets children who complete a BMI assessment. Once the BMI assessment is complete, the member will receive a certificate to present at the time of care. The copayments for up to four (4) nutritional counseling visits will be waived. This incentive is limited to children ages five through seventeen, whose Body Mass Index (BMI) falls in the 85<sup>th</sup> percentile or higher, according to standards established by the Centers for Disease Control and Prevention (CDC). Only those children who meet these requirements will be presented with a certificate. The member must complete the child BMI Assessment and present a certificate of completion in order for the provider to waive the copayment for the visit. (Following this article is a copy of the certificate for your reference.)

The certificates for both programs will include the member's name, Contract ID #, effective date and expiration date.

### **How does it affect my office?**

The directions for providers can be found on the certificates; we are also providing them here for your convenience:

1. If a Service Benefit Plan member presents a certificate, please do NOT collect the copayment amount from the member at the time of visit. The reimbursement from the local BlueCross BlueShield Plan for these visits will include the payment of the copayment.
2. If a member presents a certificate and an office visit copayment is collected in error for these types of visits, providers will be required to refund this amount to the member upon receiving payment from the local BlueCross BlueShield Plan.
3. To ensure correct reimbursement the claim must be filed with the appropriate evaluation/management procedure code and diagnosis to reflect that the visit was primarily a routine/annual examination for adults or the appropriate medical nutrition

- therapy/nutritional counseling codes and diagnosis to reflect the visit was primarily a nutritional counseling visit for children.
4. Providers may retain the certificate for their records; it is not required to be submitted with the claim.
  5. The child certificate encompasses four visits, so providers are asked to sign and date the certificate when presented by the member in order for the member to track usage of visits.
  6. For questions about the certificate or the process, please contact the local BlueCross BlueShield Plan.

**Members will be told they do not have to pay copayments for these visits, so we want to ensure our members do not get charged copayment amounts for these visits. Please follow these important directions and do not charge a copayment when a member brings in a certificate. Reimbursement for this visit will be 100 percent of the Plan Allowance, including payment of the copayment amount.**

**What action do you need to take?**

1. Please ensure that the entire office staff is aware of these programs and the process, especially those that normally collect member copayments and arrange appointments. If the patient is a Service Benefit Plan member, you may want to ask if they have a certificate to waive the copayment amount.
2. Beginning on 1/1/2010, follow the directions on the certificate that are listed above when a certificate is presented by a Service Benefit Plan member to ensure a positive member experience with your office and the patient's health coverage.

We hope that these programs will encourage wellness and prevention. We appreciate your support of these programs that encourage good health practices for our Service Benefit Plan members.

**About The BlueCross and BlueShield Service Benefit Plan**

The local BlueCross and BlueShield Plans underwrite and administer the BlueCross and BlueShield Service Benefit Plan, the largest privately underwritten health insurance contract under the Federal Employee Health Benefits (FEHB) Program. Sixty percent of all federal employees and retirees who receive their health care benefits through the government's FEHB Program are members of the Service Benefit Plan. Any questions regarding benefit changes for 2010 and these new programs should be directed to the [Plan's provider contacts].