

BLUE REVIEWSM

A newsletter for contracting institutional and professional providers

June 2020

■ CMO Perspective

The Importance of Childhood and Adolescent Immunization During the COVID-19 Pandemic

In this month's CMO Perspective, our Vice President and Chief Medical Officer, Dr. Derek J. Robinson, M.D., MBA, FACEP, CHCQM, discusses the need to educate parents on why it's safer to keep some appointments – such as doctor visits for childhood vaccinations – despite the pandemic.

[Read More](#)

■ What's New

Recoupment Letter Threshold for Government Programs Claims, Effective July 31, 2020

Effective for claims processed on or after **July 31, 2020**, Blue Cross and Blue Shield of Illinois (BCBSIL) will implement an overpayment recovery threshold for government programs claims.

[Read More](#)

■ Pharmacy Program

Drug Cost Transparency Tool Available for Fortune Brands Group Members

We are excited to introduce a pilot program for a real-time prescription benefit tool to be used by providers of BCBSIL members with Fortune Brands employer group plan, which includes the **three-character member ID prefixes FBR, RML and F2N**.

[Read More](#)

■ Claims and Coding

Coding Education Available for Medicare Advantage HMO Providers

BCBSIL has a team of Coding Compliance Specialists who offer coding and documentation education to assist providers in accurately capturing and documenting patient conditions. The Coding Compliance Specialists are available to help contracted Medicare Advantage HMO providers with education on coding practices and to assist providers with questions about industry coding standards.

[Read More](#)

■ Clinical Updates, Reminders and Related Resources

High-Tech Imaging Providers: Action Needed

If you bill BCBSIL for the technical component of Computed Tomography (CT/CTA), Magnetic Resonance Imaging (MRI/MRA), Nuclear Cardiology and Positron Emission Tomography (PET) scans, please complete your OptiNet® assessment today.

[Read More](#)

■ Electronic Options

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The BCBSIL Electronic Commerce Services phone number (800-746-4614) will be retired on **June 15, 2020**. As of this date, providers and/or clearinghouses will be directed to email their inquiries to [Electronic Commerce Services](#) versus calling.

[Read More](#)

■ Focus on Behavioral Health

Behavioral Health Providers: Take A Tour of Online Tools and Resources

Electronic options are available to help you streamline administrative functions in your office.

[Read More](#)

■ Provider Education

Provider Learning Opportunities

BCBSIL offers free webinars and workshops for the independently contracted providers who work with us. A preview of upcoming training sessions is included in this month's issue.

[Read More](#)

■ Notification and Disclosure

Important Dates and Reminders

[Check here](#) each month for a quick snapshot of recent implementations, upcoming changes, special events, important deadlines and other reminders.



Quick Reminders

Stay informed!

Watch the [News and Updates](#) on our Provider website for important announcements.

Update Your Information

Do you need to update your location, phone number, email or other important details on file with BCBSIL? Use our online forms to [request an information change](#).

Provider Training

For dates, times and online registration, visit the [Webinars and Workshops](#) page.



Contact Us

Questions? Comments? [Send an email to our editorial staff](#).

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The Importance of Childhood and Adolescent Immunization During the COVID-19 Pandemic

By: Dr. Derek J. Robinson, M.D., MBA, FACEP, CHCQM, Vice President and Chief Medical Officer, Blue Cross and Blue Shield of Illinois (BCBSIL)

In many regards, our public health officials and health care community have done an excellent job in informing the public regarding what is known about COVID-19 and the importance of preventing the spread of this infection. In fact, many Americans watch news reports of the valiant battles for survival and recovery waged in our health care settings each day. Consequently, many Americans are skeptical of whether they can safely seek routine and emergency care as pandemic rules relax and clinical services resume. During a recent call with my mother, she asked me if it was safe to keep her mammogram appointment and I encouraged her to do so. Beyond anecdotes, data is showing a pattern that is concerning, but probably not surprising, to health care providers. The Centers for Disease Control and Prevention (CDC) is reporting, “declines in outpatient pediatric visits have resulted in [fewer vaccine doses being administered](#), leaving children at-risk for vaccine-preventable diseases, including measles and whooping cough.”¹

According to Healthline, more than half of the children in the U.S. may be missing scheduled vaccinations due to the COVID-19 pandemic. Dr. Sara Goza, President of the American Academy of Pediatrics (AAP), told Healthline that educating parents during the pandemic is critical. “We’ve done a really good job of explaining why people should stay home. We can do better explaining when it is OK to go out.” Dr. Goza emphasized the importance of helping parents understand that not keeping up with proper required vaccinations will result in a lowered state of immunity in their children.²

A CDC report notes that, in Illinois, 2.8% of kindergartners were not up-to-date with the measles vaccine and did not have an exemption in the 2018-19 school year. It appears that both religious and non-religious exemptions have been climbing in Illinois.³ The coronavirus pandemic has presented added challenges when it comes to appropriately vaccinating children. “As social distancing requirements are relaxed, children who are not protected by vaccines will be more vulnerable to diseases such as measles. In response, continued coordinated efforts between health care providers and public health officials at the local, state, and federal levels will be necessary to achieve rapid catch-up vaccination.”⁴

The reality is that we must consider the possibility of having to confront other epidemics in addition to the existing

coronavirus pandemic. As part of the health care team, physicians, nurses and other health care practitioners play a vital role in educating parents on vaccinating their children. **Please join us in special outreach efforts to parents of children aged 0 to 2 years and adolescents aged 9 to 13 years regarding the importance of getting all scheduled childhood immunizations.** Below are a few tips you may choose to apply:

- Call the parents and remind them about their child's upcoming immunization.
- Encourage parents to keep their child's immunization record up-to-date.
- Communicate with parents about the preventive health benefits of age-appropriate childhood immunization.
- Discuss your office precautions during the COVID-19 pandemic.
- Schedule well child visits in the morning and sick visits in the afternoon.⁵
- Separate well child visits and sick visits in different areas of the clinic.⁶
- Allow the parents to express their concerns. What's preventing them from getting their child vaccinated?

For more information on recommended immunization schedules for children and adolescents, review the [Preventive Care Guidelines](#) on our Provider website. Also refer to [the CDC's recommendations on immunization practices](#).⁷

[Learn more about Dr. Derek J. Robinson](#)

^{1,5,6,7} CDC, Information for Pediatric Healthcare Providers. Updated May 15, 2020. Accessed May 20, 2020, at <https://www.cdc.gov/coronavirus/2019-ncov/hcp/pediatric-hcp.html>.

² McCarthy, Moira. COVID-19 Is Causing A Reduction in Child Vaccinations. Healthline, May 3, 2020. Accessed May 20, 2020, at <https://www.healthline.com/health-news/covid19-causing-decrease-in-child-vaccinations>.

³ Seither R, Loretan C, Driver K, Mellerson JL, Knighton CL, Black CL. Vaccination Coverage with Selected Vaccines and Exemption Rates Among Children in Kindergarten – United States, 2018–19 School Year. MMWR Morb Mortal Wkly Rep 2019;68:905–912. DOI: <http://dx.doi.org/10.15585/mmwr.mm6841e1>.

⁴ Santoli JM, Lindley MC, DeSilva MB, et al. Effects of the COVID-19 Pandemic on Routine Pediatric Vaccine Ordering and Administration – United States, 2020. MMWR Morb Mortal Wkly Rep 2020;69:591–593. DOI: <http://dx.doi.org/10.15585/mmwr.mm6919e2>.

The above material is for informational purposes only and is not a substitute for the independent medical judgment of a physician or other health care provider. Physicians and other health care providers are encouraged to use their own medical judgment based upon all available information and the condition of the patient in determining the appropriate course of treatment. The fact that a service or treatment is described in this material is not a guarantee that the service or treatment is a covered benefit and members should refer to their certificate of coverage for more details, including benefits, limitations and exclusions. Regardless of benefits, the final decision about any service or treatment is between the member and their health care provider.

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Recoupment Letter Threshold for Government Programs Claims, Effective July 31, 2020

Effective for claims processed on or after **July 31, 2020**, Blue Cross and Blue Shield of Illinois (BCBSIL) will implement an overpayment recovery threshold for government programs claims. This includes claims submitted to BCBSIL for services provided to our Blue Cross Medicare Advantage (PPO)SM, Blue Cross Medicare Advantage (HMO)SM, Blue Cross Community MMAI (Medicare-Medicaid Plan)SM and Blue Cross Community Health PlansSM (BCCHPSM) members. The threshold process will flag individual claims with overpayments less than \$5. Request for refund letters will not be generated or mailed, and no balances will be recouped, when the original overpayment is less than \$5.

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Drug Cost Transparency Tool Available for Fortune Brands Group Members

We're excited to introduce a pilot program for a real-time prescription benefit tool to be used by providers of Blue Cross and Blue Shield of Illinois (BCBSIL) members with the Fortune Brands employer group plan, which includes **three-character member ID prefixes FBR, RML and F2N**.

We appreciate your patience and support as we explore this real-time prescription benefit tool before expanding it beyond this pilot group.

The new real-time prescription benefit tool is part of the electronic medical record (EMR) system and is available during e-prescribing. The tool includes information like:

- Accurate total drug cost savings (based on actual payer costs and rebates) for up to three lower-cost, dose-matched, clinically equivalent alternative medications.
- Notice of any prior authorization requirements, as well as alternative medication(s) that may not need a prior authorization.
- Any other notifications that may cause pharmacy call-backs to the health care professional.

By reducing pharmacy call-backs to resolve drug coverage issues, this tool will help enhance provider productivity, identify possible treatment options that offer patients the lowest out-of-pocket costs and help to improve overall patient satisfaction and adherence. If lower-cost medication alternatives are shown, we encourage you to review the list of recommendations and determine if any changes in drug treatment are appropriate.

Please Note: This is a short-term pilot only for members with the Fortune Brands employer group plan, which includes **three-character member ID prefixes FBR, RML and F2N**. We anticipate the pilot will be extended to most BCBSIL members in the future. If your patients are not part of the Fortune Brands group, you may see error messages and real-time prescription benefit tool information may not be available. If you have questions about BCBSIL members that you feel may be missing information, and you use an **Epic EMR**, contact Surescripts®. For those with **non-Epic EMRs**, contact your EMR vendor.

The above material is for informational purposes only and is not a substitute for the independent medical judgment of a physician or other health care provider. Physicians and other health care providers are encouraged to use their own medical judgment based upon all available information and the condition of the patient in determining the appropriate course of treatment.

Pharmacy benefits and limits are subject to the terms set forth in the member's certificate of coverage. The listing of any particular drug or classification of drugs is not a guarantee of benefits.

Members should refer to their certificate of coverage for more details, including benefits, limits and exclusions. Regardless of benefits, the final decision about any medication is between the member and their health care provider.

Prime Therapeutics LLC (Prime) is a pharmacy benefit management company contracted by BCBSIL to provide pharmacy benefit management and other related services. BCBSIL, as well as several independent Blue Cross and Blue Shield Plans, has an ownership interest in Prime.

These new tools are offered by Surescripts, an independent third-party vendor that is solely responsible for its products and services. BCBSIL makes no representations or endorsements regarding the services of Surescripts. If you have any questions or concerns about the products or services offered, you should contact the vendor directly.

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Coding Education Available for Medicare Advantage HMO Providers

Blue Cross and Blue Shield of Illinois (BCBSIL) has a team of Coding Compliance Specialists who offer coding and documentation education to assist providers in accurately capturing and documenting patient conditions. The Coding Compliance Specialists are available to help contracted Medicare Advantage HMO providers with education on coding practices and to assist providers with questions about industry coding standards. The education may be especially helpful to physicians, coders, administrators, office and billing staff.

Why This is Important

Capturing patient diagnoses in the medical record assists providers and health plans in increasing health outcomes and coordinating care. In addition, the Centers for Medicare & Medicaid Services (CMS) risk adjustment program requires that all chronic conditions submitted through claims data have appropriate medical documentation. The Coding Compliance Specialists documentation and coding reviews help clinicians provide the necessary support in the medical record.

WHAT WE OFFER

Coding Documentation and Education

- CMS Medicare Advantage (MA) documentation requirements (risk adjustment overview)
- Diagnosis-specific, coding education

Coding Support

- Chart reviews based on data analytics and coding and documentation trends
- Annual health assessments
- Coding accuracy
- CMS and industry documentation guidelines

Data

- Supplemental reporting to assist with risk adjustment efforts and improving accuracy of patient Hierarchical — Condition Category (HCC) scores

Providers May Achieve:

- Coding accuracy

- Documented Monitoring, Evaluating, Assessing/Addressing and Treating (MEAT)
- Highest level of specificity
- Supporting documentation for all conditions and diagnoses documented
- **All** active conditions documented and submitted on the claim

If you're interested in working with the Coding Compliance Specialists team, have your Medicare Advantage HMO Medical Group/Independent Practice Association (MG/IPA) administrator contact their [Provider Network Consultant \(PNC\)](#).

The material presented here is for informational/educational purposes only, is not intended to be medical advice or a definitive source for coding claims and is not a substitute for the independent medical judgment of a physician or other health care provider. Health care providers are encouraged to exercise their own independent medical judgment based upon their evaluation of their patients' conditions and all available information, and to submit claims using the most appropriate code(s) based upon the medical record documentation and coding guidelines and reference materials. References to other third-party sources or organizations are not a representation, warranty or endorsement of such organization. Any questions regarding those organizations should be addressed to them directly.

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High-Tech Imaging Providers: Action Needed

If you bill Blue Cross and Blue Shield of Illinois (BCBSIL) for the technical component of Computed Tomography (CT/CTA), Magnetic Resonance Imaging (MRI/MRA), Nuclear Cardiology and Positron Emission Tomography (PET) scans, **please complete your OptiNet[®] assessment today.**

The data from the OptiNet assessment is used to evaluate imaging provider capabilities to help promote patient safety, cost effectiveness and accessibility of care. **If you don't complete the OptiNet assessment, your facility won't appear in the online directory ordering providers use during the Radiology Quality Initiative (RQI) process**, which is required for most of our PPO members.*

AIM Specialty Health[®] (AIM) administers BCBSIL's RQI program. To make it easier for providers to register and complete the online assessment, AIM has upgraded the OptiNet enrollment and data entry process. The OptiNet assessment tool features **streamlined navigation with links to helpful information, clear display of registration status and optimized format for the latest browsers.**

Please note that **you may update your information in OptiNet at any time, as needed.** If you've already registered, you do not need to re-enter any information, unless there are changes that need to be reported.

Resources and Support

- Visit the [OptiNet Assessment Tool page](#) on our website for more information and a direct link to the tool.
- If you have questions about the assessment process, call AIM OptiNet Customer Service at 800-252-2021.
- Your BCBSIL Provider Network Consultant (PNC) team is also available to help you with this and other BCBSIL programs and initiatives. To find your PNC, refer to the list of [Provider Network Consultant Assignments](#).

**Certain employer groups may require preauthorization/pre-notification for imaging services from other vendors. If you have any questions, call the number on the member's ID card.*

AIM Specialty Health (AIM) is an operating subsidiary of Anthem and an independent third party vendor that is solely responsible for its products and services. OptiNet is a registered trademark of AIM. BCBSIL makes no endorsement, representations or warranties regarding any products or services offered by independent third party vendors. If you have any questions about the products or services offered by such vendors, you should contact the vendors directly.

Please note that the fact that a guideline is available for any given treatment, or that a service has been preauthorized/pre-notified or an RQI number has been issued is not a guarantee of payment. Benefits will be determined once a claim is received and will be based upon, among other things, the member's eligibility and the terms of the member's certificate of coverage, including, but not limited to, exclusions and limitations applicable on the date services were rendered. Physicians and other health care providers are encouraged to use their own medical judgment based upon all available information and the condition of the patient in determining the appropriate course of treatment. Regardless of benefits, the final decision about any course of

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[Electronic Commerce Services](#) will remain available to help you with the following Electronic Data Interchange (EDI) transactions:

- Electronic professional and institutional claim submission (837P and 837I transactions)
- Claim payment via 835 Electronic Funds Transfer (835 EFT)
- 835 Electronic Remittance Advice (835 ERA), or delivery of claim payment information

For more information on EDI transactions and other online tools and resources, refer to the [Electronic Commerce section](#) of our website.

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Behavioral Health Providers: Take A Tour of Online Tools and Resources

Electronic options are available to help you streamline administrative functions in your office. Several examples are listed below, with links to our Provider website for details.

Your first step toward using these online options is to become a registered Availity[®] Provider Portal user. Go to [Availity](#) to sign up now at no cost. Or, if you're already registered, check with your Availity administrator to gain access to online tools and resources in your account.

If you'd like an online tour of these options and more, join us for a **BCBSIL Back to Basics 'Availity 101'** training webinar. For dates, times and online registration, go to the [Webinars and Workshops page](#) on our Provider website. To request customized training, email our [Provider Education Consultant team](#).

Express Entry	Attention Availity Administrators: You'll find this option in the My Providers menu once you log in to Availity. Express Entry allows you to add and manage provider information in your organization's account – you can complete all provider information fields in one step on most transactions.
Eligibility and Benefits	Confirm patient coverage and check benefit details in real-time, 24 hours a day, seven days a week (with the exception of Sundays from 8 a.m. to noon). You'll also get details on benefit preauthorization requirements and vendors, if applicable.
Benefit Preauthorization	If the service requires benefit preauthorization through BCBSIL, you can use the Availity Authorizations tool for inpatient admissions and select outpatient services. (Note: This does not apply to benefit preauthorization requests for HMO members.)
Electronic Claim Submission	Submit electronic claims one at a time or in batch and receive confirmation upon acceptance. Advantages include greater security and accuracy of data, with faster processing and payment.
Claim Research	This tool offers enhanced claim status for commercial claims. [Tips: Use the billing National

Tool*	<i>Provider Identifier (NPI) submitted on the claim. Also make sure the date entered for the service period includes the actual date of service.]</i>
Claim Status Tool for Government Programs	This tool offers enhanced claim status information for government programs (Medicare Advantage and Medicaid) claims.
Electronic Claim Payment and Remittance – Online Enrollment	You can enroll online to receive claim payments via 835 Electronic Funds Transfer (835 EFT) along with 835 Electronic Remittance Advice (835 ERA) files from BCBSIL.
Remittance Viewer	This tool offers providers and billing services a convenient way to view and help reconcile claim data provided by BCBSIL in the 835 ERA.
Reporting On-Demand	Use Reporting On-Demand to view, download or print duplicate copies of the provider claim summary.
Claim Inquiry Resolution*	Use this tool to request claim review for certain finalized commercial claims. (Note: <i>This tool should not be used for appeals.</i>)
Electronic Refund Management*	Receive and respond online to overpayment recovery requests on commercial claims.
Online Submission of Medical Records	Receive and respond to quality and risk adjustment medical record requests electronically via Availity's Medical Attachments application.

***These tools are not applicable for government programs claims.**

Checking eligibility and/or benefit information and/or the fact that a service has been preauthorized/pre-notified is not a guarantee of payment. Benefits will be determined once a claim is received and will be based upon, among other things, the member's eligibility and the terms of the member's certificate of coverage applicable on the date services were rendered. If you have any questions, please call the number on the member's ID card.

Availity is a trademark of Availity, LLC, a separate company that operates a health information network to provide electronic information exchange services to medical professionals. BCBSIL makes no endorsement, representations or warranties regarding any products or services provided by third-party vendors such as Availity. If you have any questions about the products or services provided by such vendors, you should contact the vendor(s) directly.

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Provider Learning Opportunities

Blue Cross and Blue Shield of Illinois (BCBSIL) offers free workshops and webinars for the independently contracted providers who work with us. These trainings focus on electronic options and other helpful tools and resources. A preview of upcoming training sessions is included below. For more information, refer to our [Webinars and Workshops page](#).

BCBSIL WEBINARS

To register now for a webinar on the list below, click on your preferred session date.

Descriptions:

Dates:

Session Times:

BCBSIL Back to Basics: 'Availity 101'

Join us for a review of electronic transactions, provider tools and helpful online resources.

- [June 9, 2020](#)
- [June 16, 2020](#)
- [June 23, 2020](#)
- [June 30, 2020](#)

11 a.m. to noon

Introducing Availity Remittance Viewer

Have you heard? This online tool gives providers and billing services a convenient way to retrieve, view, save or print claim detail information. The Reporting On-Demand application allows users to readily view, download, save and/or print the Provider Claim Summary (PCS) and other reports online, at no additional cost.

[June 18, 2020](#)

11 a.m. to noon

Monthly Provider Hot Topics Webinar

These monthly webinars will be held through December 2020. They are customized for the BCBSIL contracted provider community. BCBSIL Provider Network Consultants (PNCs) will use this format to share upcoming initiatives, program changes and updates, as well as general network announcements.

[June 10, 2020](#)

10 to 11 a.m.

Provider Onboarding Form Training

[June 24, 2020](#)

10 to 11 a.m.

These orientation webinars will give you the opportunity to ask the PNCs questions and will highlight topics such as care coordination, third party vendors, claims, benefit preauthorization and required provider training.

AVAILITY WEBINARS

Availity also offers free webinars for their registered users. For a current listing of webinar topics, dates and times, registered Availity users may log on to the secure Availity provider portal – the Live Webinar Schedule is located under the **Free Training** tab. Not yet registered with Availity? [Visit their website for details](#); or call Availity Client Services at 800-AVAILITY (282-4548) for help.

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