



# BLUE REVIEW<sup>SM</sup>

A Provider Publication

May 2023

## ■ Electronic Options

### **BlueApprovR<sup>SM</sup> Expedites Medical Surgical, Pharmacy and Behavioral Health Prior Authorization Requests – Attend a Training**

Blue Cross and Blue Shield of Illinois is hosting free webinars to share recent enhancements to BlueApprovR, our online prior authorization tool. Join us to learn how to access this tool on Availity<sup>®</sup> Essentials as part of your daily workflow.

[Read More](#)

## ■ What's New

### **New Support Program for Members with Kidney Disease**

We're offering a new support program to certain BCBSIL members who have chronic kidney disease or end-stage kidney disease, or who are at risk for these diseases.

[Read More](#)

## ■ Focus on Behavioral Health

### **Behavioral Health Consultations During Hospitalization Can Improve Access and Outcomes**

We encourage hospital staff/attending physicians to discuss behavioral health care with our members during a hospital stay and to consider consultations and follow-up care coordination when appropriate.

[Read More](#)

## **MMAI and BCCHP<sup>SM</sup> Providers: Join Our Community Stakeholder Committee**

We're hosting **quarterly meetings** to find ways to better serve our Blue Cross Community MMAI (Medicare-Medicaid Plan)<sup>SM</sup> and Blue Cross Community Health Plans<sup>SM</sup> members. Join via Zoom for the second quarter meeting on **May 18, 2023**. [Read more on News and Updates](#).

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## ■ **Wellness and Member Education**

### **Illinois Medicaid Providers: Help Your Patients Get Ready for Redetermination**

Some of your patients could lose their Illinois Medicaid benefits if they don't complete their redetermination paperwork on time. You can help by reminding your patients to update their information and watch for a letter from the Illinois Department of Healthcare and Family Services. [Read more on News and Updates](#).

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### **Track Care Visits During and After Pregnancy**

We encourage you to talk with our members about the importance of attending all care visits during and after pregnancy.

[Read More](#)

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## ■ **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](#)

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### **Reminder: AIM Specialty Health<sup>SM</sup> Is Now Carelon Medical Benefits Management**

Effective March 1, 2023, AIM changed its name to Carelon. This is a name change only – no related processes are affected. For more information, including answers to frequently asked questions, see the [News and Updates](#).

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## ■ **Claims and Coding**

### **See Our New Three-day Clinical Payment and Coding Policy for Certain Outpatient Services Prior to an Inpatient Admission**

**Effective Aug. 1, 2023**, we're implementing a new Outpatient Services Prior to an Inpatient Admission Clinical Payment and Coding Policy (CPCP038), in accordance with guidance from the Centers for Medicare & Medicaid Services.

[Read More](#)

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## ■ Clinical Updates, Reminders and Resources

### **Prior Authorization Code Updates for Some Commercial and Government Programs Members, Effective July 1, 2023**

BCBSIL is changing prior authorization requirements that may apply to some commercial non-HMO and government programs – Blue Cross Medicare Advantage (PPO)<sup>SM</sup>, BCCHP and MMAI – members. Refer to the News and Updates for a summary of [commercial](#) and [government](#) programs changes and code updates.

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## ■ Pharmacy Program

### **Pharmacy Program Update: Quarterly Changes Effective April 1, 2023 – Part 2**

Based on the availability of new prescription medications and Prime's National Pharmacy and Therapeutics Committee's review of changes in the pharmaceuticals market, some additions, revisions (drugs still covered but moved to a higher out-of-pocket payment level) and/or exclusions (drugs no longer covered) were made to the BCBSIL drug lists. Changes effective **on or after April 1, 2023**, are outlined [here](#).

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### **Pharmacy Program Updates: Prior Authorization Change Effective June 2023**

The BCBSIL pharmacy PA program encourages safe, cost effective medication use by allowing coverage when certain conditions are met. A clinical team of physicians and pharmacists develops and approves the clinical programs and criteria for medications that are appropriate for PA by reviewing U.S. Food and Drug Administration approved labeling, scientific literature, and nationally recognized guidelines. [Read more on News and Updates.](#)

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## ■ Notification and Disclosure

### **Medical Policy Updates**

Approved, new or revised BCBSIL Medical Policies and their effective dates are usually posted on our Provider website the first day of each month.

[Read More](#)



### **Quick Reminders**

#### **Stay informed!**

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

#### **Verify and Update Your Information**

Verify your directory information every 90 days. Use the [Availity® Essentials Provider Data Management](#) feature or our Demographic Change Form. **Facilities** may only use the [Demographic Change Form](#).

## 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.](#)

## bcbsil.com

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# BLUE REVIEW<sup>SM</sup>

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## BlueApprovR<sup>SM</sup> Expedites Medical Surgical, Pharmacy and Behavioral Health Prior Authorization Requests – Attend a Training

Blue Cross and Blue Shield of Illinois continues to streamline the prior authorization process to reduce your workload with BlueApprovR. This new tool, accessible in Availity<sup>®</sup> Essentials, expedites approvals for some medical and surgical, pharmacy drug and behavioral health services for many of our **commercial, non-HMO** members.

**Remember:** Member benefits vary based on the service being rendered and individual and group policy elections. **Always check eligibility and benefits first** through Availity or your preferred web vendor. This step will confirm coverage and other important details, such as prior authorization requirements and utilization management vendors, if applicable.

### BlueApprovR Tool Offers End-to-End Efficiencies

Registered Availity users have free, 24/7 access to BlueApprovR tool to:

- Request prior authorization for inpatient and outpatient medical surgical services, pharmacy drug and behavioral health services
- Get real-time prior authorization approvals for certain services
- Easily attach medical records
- Check approval status and view history

### Provider Training

Join us for an instructor-led, free webinar to learn how to use BlueApprovR. To register to attend, select your preferred date and time from the list below. Times listed are Central Time:

- [May 3, 2023 – 11 a.m. to noon](#)
- [May 4, 2023 – 10 to 11 a.m.](#)
- [May 10, 2023 – 11 a.m. to noon](#)
- [May 11, 2023 – 10 to 11 a.m.](#)
- [May 17, 2023 – 11 a.m. to noon](#)
- [May 18, 2023 – 10 to 11 a.m.](#)
- [May 24, 2023 – 11 a.m. to noon](#)
- [May 25, 2023 – 10 to 11 a.m.](#)
- [May 31, 2023 – 11 a.m. to noon](#)

## How To Access BlueApprovR via Availity Essentials To Submit Prior Authorization Requests

- In Availity, select *Payer Spaces* from the navigation menu, then *BCBSIL*
- On the BCBSIL Payer Spaces page, under the Applications tab, select *BlueApprovR*
- You'll be redirected to BlueApprovR to complete your request online

## Other Prior Authorization Request Methods

If you're not a registered Availity user, sign up today on [Availity.com](https://www.availity.com). Otherwise, you may still request prior authorization by calling the number on the member's BCBSIL ID card.

## For More Information

Refer to our [BlueApprovR page](#) for a user guide and other provider resources. Continue to watch our [News and Updates](#) for future program updates and training opportunities.

***BlueApprovR is currently unavailable for Federal Employee Program®, Medicare Advantage and Illinois Medicaid members. Please use your existing process for requesting prior authorization for these members.***

Checking eligibility and/or benefit information and/or obtaining prior authorization 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. If you have any questions, 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. Availity provides administrative services to BCBSIL. BCBSIL makes no endorsement, representations or warranties regarding third part vendors and the products and services they offer.

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# BLUE REVIEW<sup>SM</sup>

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## New Support Program for Members with Kidney Disease

We're offering a new support program to certain Blue Cross and Blue Shield of Illinois members who have **chronic kidney disease or end-stage kidney disease**, or who are at risk for these diseases. We're working with [Somatus®](#), a leading value-based kidney care organization, to deliver this program at no extra cost to eligible **Blue Cross Medicare Advantage (PPO)<sup>SM</sup> members**.

### How This Program Can Help

This program provides eligible members with a personal support team of health professionals to help them manage their kidney disease and actively follow their providers' treatment plans. The goal is to **help improve members' clinical outcomes and quality of life measures**, and to slow or stop disease progression.

The program offers members:

- One-on-one care to help them manage their kidney disease and comorbidities, and to address [social determinants of health](#)
- Personal health coaching based on their condition, treatment options and diet
- Help with transitioning safely from hospital to home
- Guidance in exploring transplant options, if appropriate
- A 24/7 Care Line staffed by Somatus nurses at 855-851-8354, ext. 9

### How You Can Help

**To find out which patients in your practice are eligible for this program, email Somatus at [provider@somatus.com](mailto:provider@somatus.com).**

Please consider encouraging your eligible patients to participate.

If you have questions, call Somatus at 855-851-8354, Monday through Friday from 7 a.m. to 7 p.m., CT.

Somatus is an independent company that provides care management services for BCBSIL members with CKD and ESKD. Somatus is wholly responsible for its own products and services. BCBSIL makes no endorsement, representations or warranties regarding third party vendors and the products and services they offer.

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## Behavioral Health Consultations During Hospitalization Can Improve Access and Outcomes

*This article is the second in a series that explores ways Blue Cross and Blue Shield of Illinois is partnering with health care providers and other community organizations to increase awareness of behavioral health services and work toward improving outcomes for our members, their families and the community.*

Coexisting physical and behavioral health conditions can be difficult to manage. Studies have found that people hospitalized for physical health conditions who also have mental illness are [more likely to be readmitted](#) than people who don't have mental illness. Proper follow-up care for behavioral health after a hospitalization is often lacking, according to the [National Committee for Quality Assurance](#).

Behavioral health consultations during a hospital stay can help our members who have physical and behavioral health conditions. Addressing behavioral health care with timely follow-ups can help **reduce hospital readmissions** and improve health outcomes, according to [NCQA](#).

We encourage hospital staff/attending physicians to discuss behavioral health with our members during a hospital stay and **to consider consultations and follow-up care coordination** when appropriate.

### Tips for Behavioral Health Consultations and Follow-up Care

To help improve outcomes for our members receiving inpatient care, we encourage hospital staff/attending physicians to consider the following:

- Discuss with our members and their medical teams how medical and behavioral health diagnoses are important and **can be intertwined**.
- Facilitate **behavioral health consultations** for our members when they're admitted to a medical unit for a medical concern and also display behavioral health symptoms.
- Coordinate care with our members' medical and behavioral health providers and social support to help ensure **timely follow-ups**. A behavioral health follow-up within 30 days after discharge can be in the form of:
  - Behavioral health inpatient admission
  - Partial hospitalization program
  - Intensive outpatient program
  - Behavioral health outpatient appointment



When a member receives a psychiatric consultation while medically inpatient and receives a secondary behavioral health diagnosis, the claim should include the **behavioral health diagnosis** and the correct Current Procedural Terminology (CPT®) **codes for a psychiatric consult**.

### Coding for Behavioral Health Consultations

When a member receives a psychiatric consultation while medically inpatient and receives a secondary behavioral health diagnosis, **include the following on claims:**

- The behavioral health diagnosis
- The correct CPT codes for a psychiatric consult. The American Medical Association has [information online \(see Pages 24 and 28\)](#) about coding for behavioral health consultations.

#### How BCBSIL Can Help

Call the number on our member's BCBSIL ID card to connect them with a **case manager support** service or other referral resources after discharge to help with ongoing treatment and follow-up.

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. 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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# BLUE REVIEW<sup>SM</sup>

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## Track Care Visits During and After Pregnancy

Prenatal and postpartum care contributes to the long-term well-being of new mothers and their infants, according to the [American College of Obstetricians and Gynecologists](#). We encourage you to talk with our members about the importance of attending all care visits during and after pregnancy.

### Addressing Health Disparities

The rate of women who die from maternal health causes continues to rise in the U.S., according to the [Centers for Disease Control and Prevention](#). Rates rose to 32.9 deaths per 100,000 live births in 2021, up from 20.1 in 2019. The rate for Black women was more than twice as high as the rate for white women. Rates also are higher for [American Indian and Alaska Native women](#) than white women.

Maternal Mortality Review Committees found that 80% of pregnancy-related [deaths could be prevented](#). Consider talking with our members about the unique risks and barriers to care they may face. See our [Health Equity and Social Determinants of Health](#) page for more information. Our [Preventive Care Guidelines](#) and [Perinatal Wellness Guidelines](#) for members also may be helpful.

### Tracking Prenatal and Postpartum Care Visits

We track the quality measure [Prenatal and Postpartum Care \(PPC\)](#) to help assess and improve our members' care. PPC captures:

- **Timeliness of prenatal care**, or the percentage of deliveries in which women had a prenatal care visit in the first trimester, on or before the enrollment start date or within 42 days of enrollment with Blue Cross and Blue Shield of Illinois
- **Postpartum care**, or the percentage of deliveries in which women had a postpartum visit on or between seven and 84 days after delivery

We also track two quality measures focused on maternal mental health: [Prenatal Depression Screening and Follow-Up \(PND-E\)](#) and [Postpartum Depression Screening and Follow-Up \(PDS-E\)](#). Read more about [maternal mental health here](#).

### Tips to Close Gaps in Care

- Check with our members to ensure that **initial prenatal visits** are scheduled in the first 12 weeks of pregnancy with an

OB-GYN, primary care provider or other prenatal practitioner.

- Be aware that **post-operative visits**, which typically occur within a couple of days of discharge or during an inpatient stay after a cesarean section, don't count as a postpartum visit. A postpartum visit must take place on or between **seven and 84 days** after delivery. Members should be reminded to schedule their postpartum care visit during the C-section post-op visit.
- Data for this measure is collected from claims and chart review for services performed by an OB-GYN, midwife, family practitioner or other PCP. Services provided during telehealth visits, e-visits and virtual check-ups are eligible for reporting to meet the measure.
  - **When documenting a prenatal visit**, include diagnosis of pregnancy, last menstrual period or estimated date of delivery, prenatal risk assessment, complete obstetrical history, fetal heart tone and screening tests.
  - **When documenting a postpartum visit**, note postpartum care, check or six-week check. Document the pelvic exam and evaluation of weight, blood pressure, breasts and abdomen.

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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# BLUE REVIEW<sup>SM</sup>

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## Provider Learning Opportunities

Blue Cross and Blue Shield of Illinois 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](#). **Note: All times listed are Central Time.**

### BCBSIL WEBINARS

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

Descriptions:	Dates:	Session Times:
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**Availity® Essentials Prior Authorizations and BlueApprovR<sup>SM</sup> Tool**

*Learn how to electronically submit inpatient and outpatient prior authorization handled by BCBSIL using Availity's Authorization and BlueApprovR tool.*

[May 3, 2023](#)  
[May 10, 2023](#)  
[May 17, 2023](#)  
[May 24, 2023](#)  
[May 31, 2023](#)

11 a.m. to noon

**Availity Claim Status, Clinical Claim Appeals and Message This Payer**

*Learn how to verify claim status, submit and monitor clinical claim appeals online and Message This Payer using the Availity Essentials Portal.*

[May 11, 2023](#)  
[May 18, 2023](#)

11 a.m. to noon

**Availity Orientation: Save Time and Go Online**

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

[May 2, 2023](#)  
[May 9, 2023](#)  
[May 16, 2023](#)  
[May 23, 2023](#)  
[May 30, 2023](#)

11 a.m. to noon

### Availity Remittance Viewer and Reporting On-Demand

[May 18, 2023](#)

1 to 2 p.m.

*These online tools give providers and billing services a convenient way to view claim detail information from the 835 Electronic Remittance Advice (835 ERA) and the Provider Claim Summary (PCS). Attend a webinar to learn how to gain or grant access, conduct a search, view general and payer-specific information, and save or print results.*

### BlueApprovR: Prior Authorization Process

[May 4, 2023](#)

10 to 11 a.m.

*Learn how to access and use BlueApprovR via Availity Essentials to submit and secure real-time approvals for specialty pharmacy drug, Behavioral Health clinical evaluation and medical surgical prior authorization requests for many BCBSIL commercial members.*

[May 11, 2023](#)

[May 18, 2023](#)

[May 25, 2023](#)

### Coding Stages and Treatment for Chronic Kidney Disease

[May 19, 2023](#)

Noon to 12:30 p.m.

*Join our Coding Compliance team for a webinar on coding for CKD. We will discuss coding for CKD with comorbidities and closing gaps in care.*

### Monthly Provider Hot Topics Webinar

[May 11, 2023](#)

10 to 11:30 a.m.

*Stay up to date on the latest news from BCBSIL! Engage with our PNCs to learn about upcoming initiatives, program changes and updates, as well as general network announcements.*

### Orientation Webinars for New Commercial Providers

[May 24, 2023](#)

10 to 11 a.m.

*Learn how we can best work together to improve the health of our members. Ask questions and engage with our PNCs on topics such as care coordination, third party vendors, claims, prior authorization and required provider training.*

### Orientation Webinars for New MMAI and/or BCCHP Providers

[May 25, 2023](#)

1 to 2 p.m.

*Learn how we can best work together to improve the health of our members. Ask questions and engage with our PNCs on topics such as network participation and benefits, claims, post-processing claim inquiries, supplemental resources, credentialing and contracting.*

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Checking eligibility and benefits and/or obtaining prior authorization is not a guarantee of payment of benefits. Payment of benefits is subject to several factors, including, but not limited to, eligibility at the time of service, payment of premiums/contributions, amounts allowable for services, supporting medical documentation, and other terms, conditions, limitations, and exclusions set forth in the member's policy certificate and/or benefits booklet and or summary plan description. Regardless of any prior authorization or benefit determination, the final decision regarding any treatment or service is between the patient and the health care provider. If you have any questions, call the number on the member's BCBSIL ID card.

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# BLUE REVIEW<sup>SM</sup>

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## See Our New Three-day Clinical Payment and Coding Policy for Certain Outpatient Services Prior to an Inpatient Admission

### What's changing?

**Effective Aug. 1, 2023**, we're implementing a new Outpatient Services Prior to an Inpatient Admission Clinical Payment and Coding Policy (CPCP038), in accordance with guidance from the Centers for Medicare & Medicaid Services, which applies a three-day rule for certain services provided to outpatients who are later admitted as inpatients.

Blue Cross and Blue Shield of Illinois will review claims that fall under the three-day payment window. The three-day payment policy states that outpatient diagnostic and non-diagnostic services performed up to three days prior to a related admission to a hospital are considered inpatient services and should be submitted as part of the claim for inpatient reimbursement.

### The details:

Under this new BCBSIL policy:

- If an admitting hospital has rendered related diagnostic or related non-diagnostic services three days preceding and/or on the date of a member's inpatient admission, the services may be considered inpatient services and included as part of the inpatient reimbursement; or
- If an admitting hospital renders unrelated diagnostic or unrelated non-diagnostic outpatient services three days preceding and/or on the date of a member's inpatient admission, the hospital may be reimbursed separately for the unrelated outpatient services.

### What should I expect?

If BCBSIL determines the claim is for related services occurring within the three-day time frame as outlined above, we may ask you to submit a corrected claim.

### What do I need to do?

Refer to our [Clinical Payment and Coding Policies page](#) to review in detail the new policy – [Outpatient Services Prior to an Inpatient Admission, CPCP038](#).

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## Medical Policy Updates

Approved, new or revised Blue Cross and Blue Shield of Illinois Medical Policies and their effective dates are usually posted on [our Provider website](#) the first day of each month. Medical policies, both new and revised, are used as guidelines for benefit determinations in health care benefit programs for most BCBSIL members, unless otherwise indicated. These policies may affect your reimbursement and your patients' benefits.

**Although medical policies can be used as a guide, providers serving HMO members should refer to the HMO Scope of Benefits in the [BCBSIL Provider Manual](#), located in the Standards and Requirements section.**

You may view active, new, and revised policies, along with policies pending implementation, by visiting the [BCBSIL Medical Policy page](#). Select "View all Active and Pending Medical Policies." After confirming your agreement with the Medical Policies disclaimer, you will be directed to the Medical Policies homepage.

You also may view draft medical policies that are under development or are in the process of being revised by selecting "View and comment on Draft Medical Policies." After confirming your agreement with the Medical Policies disclaimer, you will be directed to the Draft Medical Policies page. Click on the title of the draft policy you wish to review, and then select "Comments" to submit your feedback to us.

Visit the [Standards and Requirements section](#) of our website for access to the most complete and up-to-date BCBSIL [Medical Policy](#) information. You'll find a [Recommended Clinical Review \(Predetermination\) Code List](#) in the Related Resources on our [Recommended Clinical Review \(Predetermination\) page](#) – this list is updated on a monthly basis. In addition to medical policies, other policies and information regarding payment can be found on the [Clinical Payment and Coding Policies](#) page.

The BCBSIL Medical Policies are for informational purposes only and are not a substitute for the independent medical judgment of health care providers. Providers are instructed to exercise their own clinical judgment based on each individual patient's health care needs. The fact that a service or treatment is described in a medical policy is not a guarantee that the service or treatment is a covered benefit under a health benefit plan. Some benefit plans administered by BCBSIL, such as some self-funded employer plans or governmental plans, may not utilize BCBSIL Medical Policies. Members should contact the customer service number on their member ID card for more specific coverage information.