



BLUE REVIEWSM

A Provider Publication

October 2021

■ What's New

Blue Review Readership Survey: Your Voice Matters

The 2021 *Blue Review* readership survey will be open through the end of November. Your input will inform our plans to enhance the *Blue Review* and other provider communications in 2022. We look forward to hearing from you.

[Read More](#)

2022 Telehealth Services

In support of our members and employer groups, in 2022 Blue Cross and Blue Shield of Illinois (BCBSIL) will continue to cover the expanded telehealth services that we've covered in 2021. [Read more on News and Updates.](#)

■ Community Involvement

Blue Door Neighborhood CenterSM Celebrates National Hispanic Heritage Month and Highlights Breast Cancer Awareness Month

Your patients are invited to join us at the Blue Door Neighborhood Center (BDNCSM) to celebrate **National Hispanic Heritage Month** on multiple dates, times and locations.

[Read More](#)

■ Wellness and Member Education

Supporting Quality Care During Breast Cancer Awareness Month

October is **Breast Cancer Awareness Month** and a great time to talk with our members about the

importance of regular screenings. Screening is the best way to find breast cancer early, when it's easier to treat, and may help reduce the risk of death.

[Read More](#)

Reminder: Controlling High Blood Pressure

A healthy blood pressure can help prevent heart disease, stroke and kidney disease. [Controlling high blood pressure](#) is recognized as a quality measure from the National Committee for Quality Assurance (NCQA). It assesses adults with a diagnosis of hypertension whose blood pressure is controlled. We encourage you to document our members' systolic and diastolic blood pressure readings in their medical records at every appointment. For other quick recommendations, reminders and resources, see our April 2021 article, [Blood Pressure Control: Speaking Out About the 'Silent Killer](#).

Relaxed COVID-19 Mitigation Measures May Equal More Flu

Getting the flu vaccine is the first and most important step in protecting against influenza and its potentially serious complications.

[Read More](#)

■ Pharmacy Program

Coverage Replacement for Smoking Cessation Product CHANTIX® Due to Voluntary Recall

Drug manufacturer Pfizer has issued a voluntary recall of its CHANTIX smoking cessation product. To help alleviate a shortage of these products, BCBSIL is **temporarily covering Apo-Varenicline (varenicline tartrate) 0.5 mg and 1 mg tablets**.

[Read More](#)

■ Electronic Options

Check Eligibility and Benefits: Don't skip this important first step!

Is your patient's membership with BCBSIL still active? Are you or your practice/medical group in- or out-of-network for a specific patient? Is prior authorization required for a particular member/service?

[Read More](#)

Update: View Professional Provider Fee Schedules via Availity®

In the [November 2020 News and Updates](#), we confirmed the launch of the Fee Schedule Listing tool via the Availity Provider Portal. Recently, we updated this online tool to include a Network dropdown menu on the Tell Us About Your Organization page.

[Read More](#)

■ Claims and Coding

Fighting Fraud, Waste and Abuse: Billing a COVID-19 Vaccine Administration

BCBSIL has become aware of several cases involving Evaluation and Management (E/M) visits being billed on the same claim as COVID-19 immunization administration services. BCBSIL's guidelines state, **“When billing a vaccine administration code with an office visit, if the vaccine is not the primary purpose of the office visit, bill the vaccine on a separate claim.”**

[Read More](#)

Reminder: CPT® Codes May Change

As a reminder, Current Procedural Terminology (CPT) codes may change throughout the year due to changes (new, replaced or removed codes) implemented by the American Medical Association (AMA).

[Read More](#)

Change to Some Primary and Secondary Claims Coordination, Effective Dec. 13, 2021

As of **Dec. 13, 2021**, we'll be making changes to increase efficiencies in coordinating claims for providers when a BCBSIL member has primary and secondary health insurance coverage from two BCBSIL health plans or BCBSIL and one of four other plans.

[Read More](#)

New Laboratory Policies Coming Jan. 1, 2022

Beginning **Jan. 1, 2022**, BCBSIL will implement new policies and a new program for claims for certain outpatient laboratory services provided to our fully insured **commercial, non-HMO** members. Our New Laboratory Management Program will help ensure our members get the right care at the right time and in the right setting.

[Read More](#)

■ Clinical Updates, Resources and Reminders

Reminder: Prior Authorization Vendor Change for Pharmacy Medical Oncology – Join Us for A Webinar

Starting **Oct. 11, 2021**, AIM Specialty Health® (AIM), rather than BCBSIL, will manage prior authorization requests and post-service medical necessity reviews for drugs in the Pharmacy Medical

Oncology care category for some of our **commercial, non-HMO** members. Sign up now for a webinar to learn more.

[Read More](#)

Are you using these shared decision-making aids?

Shared decision-making is a communications process. It's a way for providers and patients to make informed health care decisions that align with what matters most to patients.

[Read More](#)

■ Focus on Behavioral Health

Earn CME/CEU Credit at Free Webinar on Comorbid Conditions

Join our board-certified psychiatrists and behavioral health medical directors for a one-hour webinar on comorbid behavioral health and physical health conditions. The free webinar is on **Monday, Oct. 25, 2021, at 8 a.m., CT.**

[Read More](#)

■ Quality Improvement and Reporting

2021 Annual HMO and PPO HEDIS® Reports

Each year, BCBSIL reports audited Healthcare Effectiveness Data and Information Set (HEDIS) results.

[Read More](#)

■ Provider Education

Network Operations Update: Voicemail and Email Deactivation, Answers to Commonly Asked Questions

In an effort to streamline provider inquiries and improve administrative processes, the BCBSIL Network Operations team is retiring the following phone number/voicemail and email address: 312-653-6555, NetOps_provider_update@bcbsil.com.

[Read More](#)

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.

Procedure Code and Fee Schedule Updates

As part of our commitment to help inform our independently contracted providers of certain developments, BCBSIL has designated a specific section in the *Blue Review* to notify you of any significant changes to the physician fee schedules.

[Read More](#)



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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***Blue Review* Readership Survey: Your Voice Matters**

We were encouraged by the number of providers who took the time to complete our annual readership survey last year, despite the chaos of COVID-19. Your ratings helped us understand your content preferences. Your comments gave us insight into some of the challenges you faced and how you and your staff coped, survived and even thrived. We can't thank you enough for sharing your time, experience and unique perspective.

The *Blue Review* is one of our key communication channels. So, as we move into the final months of 2021, it's time to take a step back once again to make sure the newsletter is serving its purpose.

- Are we delivering content that's clear, concise and compelling?
- Was there an article or topic you found especially helpful or memorable?
- Is the newsletter format easy to navigate?

The 2021 survey will be open through the end of November. Your input will inform our plans to enhance the *Blue Review* and other provider communications in 2022. We look forward to hearing from you.

[Take the survey now!](#)

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Blue Door Neighborhood CenterSM Celebrates National Hispanic Heritage Month and Highlights Breast Cancer Awareness Month

Your patients are invited to join us at the Blue Door Neighborhood Center (BDNCSM) to celebrate **National Hispanic Heritage Month** on multiple dates, times and locations. One of Chicago's Latino Influencers, founder and CEO of [Healthy Hood](#), Tanya Lozano, will lead us in celebrating this national observance month from **11 a.m. to 3 p.m. on Saturday, October 16**. There will be live music, art, food and health information focused on Latino health.

Or, if the **South Lawndale** location is more convenient, your patients are invited to join Chef Urban Pilon October 14 for a conversation on the history of Afro-Caribbean and Afro-Latino food from **5:30 to 7 p.m. at the South Lawndale** location. A cooking demonstration and taste test will follow the conversation. Registration in advance is highly encouraged.

We will be offering farmers markets with free produce for all community members again this month.

- October 13, noon to 2 p.m. at the **Pullman BDNC**
- October 14, noon to 2 p.m. at the **Morgan Park BDNC**
- October 14, 1 to 3 p.m. at the **South Lawndale BDNC**

October is **Breast Cancer Awareness Month**, so you might want to encourage your patients in the **South Lawndale** community to stop by BDNC while [Equal Hope](#) is there on **October 5 (English) and 7 (Spanish) from 6 to 7 p.m.** to discuss breast cancer screening recommendations for all individuals or, when [ELLAS](#) hosts Cafe con Conchas and discusses resources along the spectrum of breast cancer care, including screening recommendations and resources, and support for individuals diagnosed with cancer on **Friday, October 15 from 10 a.m. to noon**.

The BDNC is also hosting a virtual **Ask a Doctor** event to discuss COVID-19, asthma, allergies and schools (hablamos sobre COVID-19, asma, alergias y las escuelas) in partnership with the American Lung Association. You can let your patients know it will be available in English and Spanish on **Thursday, October 28 from 6 to 7 p.m.**

These are just a few of the programs we'll offer at our BDNC sites on multiple dates and times in October. The BDNC locations also offer health education and connections to social support services. All programming – in person and virtual – at BDNC locations is **free and open to BCBSIL members and non-members**. Encourage your patients to visit the [BDNC Facebook page](#) for other events and happenings at all three locations. If you or your patients have questions, [email the](#)

[BDNC](#) or call 773-253-0900.

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. References to third party sources or organizations are not a representation, warranty or endorsement of such organizations. Any questions regarding those organizations should be addressed to them directly. 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.

BDNC locations are not medical facilities, do not have medical providers on staff, do not offer medical advice, and do not provide health care or mental health services.

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Supporting Quality Care During Breast Cancer Awareness Month

Breast cancer is the second leading cause of death among women in the U.S., according to the [Centers for Disease Control and Prevention \(CDC\)](#). About [1 in 8 women](#) will get breast cancer at some point in their life. October is **Breast Cancer Awareness Month** and a great time to talk with our members about the importance of regular screenings. We've created some [resources](#) that may help. Screening is the best way to find breast cancer early, when it's easier to treat, and may help reduce the risk of death.

Closing Care Gaps

[The U.S. Preventive Services Task Force](#) recommends that **women ages 50 to 74 be screened for breast cancer every two years**. You may want to discuss with members the risks and benefits of starting mammogram screenings before age 50.

[Breast cancer screening](#) is also a Healthcare Effectiveness Data and Information Set (HEDIS[®]) measure from the National Committee for Quality Assurance (NCQA). The measure tracks women ages 50 to 74 who had at least one mammogram in the past two years. Blue Cross and Blue Shield of Illinois (BCBSIL) collects data from HEDIS measures to help assess and improve the quality of care our members receive.

See our [preventive care guidelines](#) on breast cancer screening.

Tips and Suggestions to Consider

- Talk with our members about breast cancer [risk factors and regular screenings](#).
- Document screenings in the medical record. Indicate the specific date and result.
- Document medical and surgical history in the medical record, including dates.
- Use correct diagnosis and procedure codes. Submit claims and encounter data in a timely manner.
- For men who are at high risk, the American Cancer Society recommends [discussing with them how to manage risks](#).

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Relaxed COVID-19 Mitigation Measures May Equal More Flu

The flu kills thousands of people each year and sends hundreds of thousands more to the hospital. And, although respiratory viruses that cause flu did not spread as much as usual during last year's flu season, the Centers for Disease Control and Prevention (CDC) says most people 6 months or older should still get a flu shot this year because relaxed COVID-19 mitigation measures may result in an increase in flu activity during the upcoming 2021–2022 flu season.¹

Getting the flu vaccine is the first and most important step in protecting against influenza and its potentially serious complications.

Children 6 months to 8 years who are receiving their first flu vaccination, and those children who have previously received only one dose of flu vaccine, should get two doses of the vaccine this flu season.² To prevent missed opportunities, you may want to discuss and offer a flu vaccine during office visit, if applicable. A flu vaccine is the leading prevention against seasonal influenza.³ Antiviral drugs may be used to lessen symptoms of the flu, however, educating patients that these drugs are not a substitute for getting a flu vaccine is vital.³

Getting a flu shot is part of the Illinois Medicaid Healthcare Effectiveness Data and Information Set (HEDIS[®]) measure for children up to 2 years of age and a question asked on the Consumer Assessment of Healthcare Providers and Systems (CAHPS[®]) survey. You may want to talk to your patients about the flu vaccine and encourage them to get one this year. There are several misconceptions regarding this vaccine, so it is important to educate patients about the risks and benefits of getting a yearly flu vaccine.

The following discussion points may assist you in helping your patients feel more informed and aware of their health care:

- Benefits of the flu vaccine
- Side effects that could occur after receiving the flu vaccine
- Flu symptoms
- Effectiveness of the flu vaccination
- Patients' concerns/issues regarding this vaccine

Your patients may also ask you the following questions. [The CDC providers answers.](#)¹

- Can I have flu and COVID-19 at the same time?

- If I get sick with flu, am I at higher risk of contracting COVID-19?
- Is there a test that can detect both flu and COVID-19?
- Will a flu vaccine protect me against COVID-19?
- Does a flu vaccination increase your risk of getting COVID-19?
- Because symptoms of flu and COVID-19 are similar, how will I know if I have flu or COVID-19?
- I think I may have flu. Is it safe for me to visit my health care provider when COVID-19 is spreading in my community?

¹ CDC, Frequently Asked Influenza (Flu) Questions: 2021-2022 Season, Sept. 16, 2021. <https://www.cdc.gov/flu/season/faq-flu-season-2021-2022.htm#coadmin>

² CDC, Flu & Young Children, Sept. 14, 2021. https://www.cdc.gov/flu/highrisk/children.htm#anchor_1577721999236

³ CDC, What You Should Know About Flu Antiviral Drugs, Aug. 31, 2021. <https://www.cdc.gov/flu/treatment/whatyoushould.htm#benefits>

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Coverage Replacement for Smoking Cessation Product CHANTIX[®] Due to Voluntary Recall

Drug manufacturer Pfizer has issued a voluntary recall of its CHANTIX smoking cessation product. To help alleviate a shortage of these products, Blue Cross and Blue Shield of Illinois (BCBSIL) is **temporarily covering Apo-Varenicline (varenicline tartrate) 0.5 mg and 1 mg tablets**. The coverage was effective as of Aug. 10, 2021. **It doesn't apply to members in our Medicaid or Medicare Advantage plans.**

About the Chantix recall: The recall is due to higher than acceptable levels of N-nitroso-varenicline, an impurity that may be linked to an increased risk of cancer. As of **Sept. 16, 2021**, the recall was expanded to all lots of 0.5 mg tablets and 1 mg tablets. Learn more from the [U.S. Food and Drug Administration \(FDA\)](#).

What this means for you: Consider contacting our members who may be taking CHANTIX to discuss other treatment options. We will notify affected members, and you may also receive a notification. Our members may also be alerted to this recall notice by their pharmacy.

The [FDA advises individuals](#) taking the recalled Chantix to continue to do so until their doctor, health care professional or pharmacist provides a replacement. No immediate risk to those taking CHANTIX has been found because it's meant for short-term use. The health benefits of stopping smoking outweigh the cancer risk from the impurity, according to the [FDA](#).

Benefits and coverage: Members' cost share for Apo-Varenicline is based on their benefit plan and is the same as their cost share for Chantix. Some members' plans also have coverage under a preventive health benefit, which offers lower or no cost share to encourage adherence.

If you have questions about a member's pharmacy benefits, call the number on the member's ID card.

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Check Eligibility and Benefits: Don't skip this important first step!

Is your patient's membership with Blue Cross and Blue Shield of Illinois (BCBSIL) still active? Are you or your practice/medical group in- or out-of-network for a specific patient? Is prior authorization required for a particular member/service?

Get Answers Up Front

Benefits will vary based on the service being rendered and individual and group policy elections. It's critical to check eligibility and benefits for each patient before every scheduled appointment. Eligibility and benefit quotes include important information about the patients' benefits, such as membership verification, coverage status and applicable copayment, coinsurance and deductible amounts. Also, the benefit quote may include information on applicable prior authorization or pre-notification requirements.* When services may not be covered, you should notify members that they may be billed directly.

Don't Take Chances

Ask to see the member's BCBSIL ID card for current information. Also ask for a driver's license or other photo ID to help guard against medical identity theft. Remind your patients to call the number on their BCBSIL card if they have questions about their benefits.

Use Online Options

We encourage you to check eligibility and benefits via an electronic 270 transaction through the Availity[®] Provider Portal or your preferred vendor portal. You may conduct electronic eligibility and benefits inquiries for local BCBSIL members, and out-of-area Blue Plan and Federal Employee Program[®] (FEP[®]) members.

Learn More

For more information, such as an [Availity user guide](#), refer to the [Eligibility and Benefits page](#) on our Provider website. BCBSIL also offers educational webinars with an emphasis on electronic transactions, including eligibility and benefits inquiries. Refer to the [Webinars and Workshops](#) page for upcoming dates, times and registration links to sign up now.

***Note:** For commercial non-HMO members, even if prior authorization isn't required, you may still want to submit a

voluntary predetermination request. This step can help avoid post-service medical necessity review. Checking eligibility and benefits can't tell you when to request predetermination, since it's optional. But there's a [Medical Policy Reference List](#) on our [Predetermination page](#) to help you decide.

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 any products or services provided by third party vendors such as Availity.

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 their health care provider.

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Update: View Professional Provider Fee Schedules via Availity[®]

In the [November 2020 News and Updates](#), we confirmed the launch of the Fee Schedule Listing tool via the Availity Provider Portal. This tool allows participating professional providers in our Preferred Provider Option (PPO) and Blue Choice PPOSM networks to immediately view the contracted price allowance for patient services.

Recently, we updated this online tool to include a Network dropdown menu on the Tell Us About Your Organization page, with the following options to choose from:

- PPO
- Blue OptionsSM
- Blue Choice Preferred PPOSM
- Blue Choice SelectSM
- Blue High Performance NetworkSM (BlueHPNSM)

You must be registered with [Availity](#) to use this Fee Schedule Listing tool. You can [sign up online today](#), at no charge. For registration help, call Availity Client Services at 800-282-4548. If you don't have online access, you may continue to fax and/or mail your requests using the Fee Schedule Request forms located on the [Forms page](#) of our Provider website.

For More Information

Refer to the instructional [Professional Fee Schedule User Guide](#) found in our [Provider Tools](#) section. If you need further assistance, email our [Provider Education Consultants](#).

Medicare Advantage and Illinois Medicaid Fee Schedules

These fee schedules are available in Availity by selecting the Claims & Payments menu, Fee Schedule Listing, and then choose the appropriate Additional Fee Schedules for Medicare and/or Medicaid. They can also be found via the Resources tab in the BCBSIL-branded Payer Spaces section in Availity.

This information does not apply to HMO providers.

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Fighting Fraud, Waste and Abuse: Billing a COVID-19 Vaccine Administration

Blue Cross and Blue Shield of Illinois (BCBSIL) has become aware of several cases involving Evaluation and Management (E/M) visits being billed on the same claim as COVID-19 immunization administration services. [BCBSIL's guidelines state](#): **“When billing a vaccine administration code with an office visit, if the vaccine is not the primary purpose of the office visit, bill the vaccine on a separate claim.”**

The American Medical Association (AMA) published guidelines concerning COVID-19 immunization administration Healthcare Common Procedure Coding System (HCPCS) codes and E/M Current Procedural Terminology (CPT[®]) code billing. BCBSIL encourages all providers offering COVID-19 immunization services to review [this guidance](#). According to AMA guidelines, the vaccine counselling provided by a physician or qualified health care professional is included in the vaccine administration code. Consequently, when there is no separately identifiable service performed during the same visit, the provider should not be billing for an E/M visit.

If you are aware of an instance of potential fraud, waste and/or abuse, we encourage you to [file a report online](#) or call the BCBSIL Fraud Hotline at 877-272-9741 to create a report. All online reports and calls are confidential, and you may remain anonymous. For more information, visit our [Fraud and Abuse](#) page.

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Reminder: CPT[®] Codes May Change

As a reminder, Current Procedural Terminology (CPT) codes may change throughout the year due to changes (new, replaced or removed codes) implemented by the American Medical Association (AMA). Refer to the [AMA website](#) for more information on CPT codes.

Our online systems are updated to reflect AMA coding changes. Be sure to check eligibility and benefits prior to rendering services to our members to confirm coverage and other important details, such as which services may require prior authorization.

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Checking eligibility and/or 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 their health care provider.

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Change to Some Primary and Secondary Claims Coordination, Effective Dec. 13, 2021

As of **Dec. 13, 2021**, we'll be making changes to increase efficiencies in coordinating claims for providers when a Blue Cross and Blue Shield of Illinois (BCBSIL) member has primary and secondary health insurance coverage from **two** BCBSIL health plans or BCBSIL and one of the following four Plans:

- Blue Cross and Blue Shield of Montana
- Blue Cross and Blue Shield of New Mexico
- Blue Cross and Blue Shield of Oklahoma
- Blue Cross and Blue Shield of Texas

What's changing for providers?

In the new process:

- First, you'll submit just the primary claim.
- You'll receive the determination on the primary claim through your normal channels detailing the primary claim adjudication.
- Next, submit the secondary claim with the primary claim payment information under the secondary policy following the Coordination of Benefits (COB) guidelines documented in the [Provider Manual](#).

These changes will help decrease the time it takes to process and coordinate payment of these claims. This new process is for members with a BCBSIL health plan and another plan with BCBSIL or one of the other four Plans listed above.

Note: The standard guideline for timely filing with COB is as follows and will not be changing:

- Primary claim timely filing begins at date of services rendered.
- Secondary claim timely filing begins at date of primary claim final adjudication.

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New Laboratory Policies Coming Jan. 1, 2022

Beginning **Jan. 1, 2022**, Blue Cross and Blue Shield of Illinois (BCBSIL) will implement new policies and a new program for claims for certain outpatient laboratory services provided to our fully insured **commercial, non-HMO** members. Our New Laboratory Management Program will help ensure our members get the right care at the right time and in the right setting. It will also help you better prepare and submit claims that support and reflect high quality, affordable care delivery to our members.

This program does not apply to government programs or any of our HMO members.

See below for key points to help you prepare, including a list of training dates.

Medical Policy Updates

Watch for new and revised reimbursement and [BCBSIL Medical Policies](#) effective **Jan. 1, 2022**, related to certain laboratory services, tests and procedures. Also refer to our [Clinical Payment and Coding Policies](#).

Affected Claims

Our new program will include the following outpatient laboratory claims:

- Dates-of-service on or after **Jan. 1, 2022**
- Performed in an outpatient setting (typically office, hospital outpatient or independent laboratory)

New Claim Simulation Tool

Effective **Jan. 1, 2022**, you can get free access to the program's **Trial Claim Advice Tool**, which allows you to input codes and diagnoses to see, before submitting a claim, the potential outcome of your claim. The Trial Claim Advice Tool is a free simulation tool and does not guarantee approval, coverage or reimbursement of services. Responses consider information entered through the tool for the date of service entered and historical claims finalized through the previous business day. Claims not yet finalized won't be considered.

What you need to do:

- To access the Trial Claim Advice Tool, log on to the [Availity® Provider Portal](#).
- To get to the Trial Claim Advice Tool, use the single sign-on feature via the BCBSIL-branded Payer Spaces section

within the Availity portal.

- If you're not a registered Availity user, we encourage you to sign up before the January 2022 program activation, to gain access to the Trial Claim Advice Tool. Register on the [Availity website](#) today, at no charge. For registration help, call Availity Client Services at 800-282-4548.

Provider Training

Attend free webinars on how to use the Trial Claim Advice Tool and learn more about the Laboratory Management Program. To register, select your preferred date and time from the list below:

- [Nov. 4, 2021 – noon to 1 p.m., CT](#)
- [Nov. 9, 2021 – 10 to 11 a.m., CT](#)
- [Nov. 11, 2021 – 11 a.m. to noon, CT](#)
- [Nov. 17, 2021 – 11 a.m. to noon, CT](#)
- [Nov. 23, 2021 – 10 to 11 a.m., CT](#)
- [Dec. 1, 2021 – 11 a.m. to noon, CT](#)
- [Dec. 7, 2021 – 2 to 3 p.m., CT](#)
- [Dec. 15, 2021 – 11 a.m. to noon, CT](#)
- [Dec. 28, 2021 – 11 a.m. to noon, CT](#)
- [Jan. 5, 2022 – 11 a.m. to noon, CT](#)

For More Information

Continue to watch the [News and Updates](#) for future program updates.

This program does not apply to government programs or any of our HMO members.

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BLUE REVIEWSM

A Provider Publication

October 2021

Reminder: Prior Authorization Vendor Change for Pharmacy Medical Oncology – Join Us for A Webinar

What's Changing: Blue Cross and Blue Shield of Illinois (BCBSIL) is changing prior authorization requirements that may apply to some **commercial, non-HMO** members.

As we announced on [July 7, 2021](#), starting **Oct. 11, 2021**, **AIM Specialty Health® (AIM)**, rather than BCBSIL, will manage prior authorization requests and post-service medical necessity reviews for drugs in the Pharmacy Medical Oncology care category for some BCBSIL members. (Remember: Always check eligibility and benefits first via the [Availity® Provider Portal](#) or your preferred vendor before rendering services. This step will confirm prior authorization requirements and utilization management vendors, if applicable.)

Note: AIM will review requests for oncology drugs that are supported by an oncology diagnosis. If the drug requested isn't associated with an oncology diagnosis, it will be reviewed by BCBSIL.

To prepare for this change, make sure you're registered with AIM, prior to Oct. 11, 2021. If you're already registered with AIM to submit Radiology Quality Initiative (RQI) requests for BCBSIL members, you don't need to register again. There are two ways to register:

- **Online** – Go to the [AIM ProviderPortal](#); or
- **By Phone** – Call the AIM Contact Center at 844-377-1285, Monday - Friday, 7 a.m. to 7 p.m., CT

For more reminders, key dates and scenarios as we transition to AIM, please refer to the [previous announcement](#). We've also listed some quick tips on using the *AIM ProviderPortal* for pre- and post-service review below. **For more in-depth training, be sure to sign up for a webinar.**

Tips for Using the *AIM ProviderPortal*

- Don't submit medical records to BCBSIL for care categories managed by AIM
- If medical records are needed, AIM will request them via the *AIM ProviderPortal*
- Use the [AIM ProviderPortal](#) to request prior authorization (pre-service)
- Post-service review requests should also be submitted directly to AIM via the *ProviderPortal*
- Check prior authorization status on the *AIM ProviderPortal*

AIM's *ProviderPortal* Offers End-to-End Efficiencies

- Self-service available 24/7
- Check order status and view order history
- Faster pre-service decision turnaround times than post-service reviews
- Smart clinical algorithms mean real-time determinations, in many cases
- Increases payment certainty
- Transparent feedback before transferring to clinical review

Provider Training

AIM is hosting free webinars on how to use the AIM *ProviderPortal* to enter medical oncology prior authorization requests. To register, select your preferred date and time from the list below:

This program does not apply to government programs or any of our HMO members.

- [Oct. 6, 2021 – noon to 1 p.m., CT](#)
- [Oct. 12, 2021 – noon to 1 p.m., CT](#)
- [Oct. 28, 2021 – 9 to 10 a.m., CT](#)
- [Nov. 2, 2021 – 2 to 3 p.m., CT](#)

Also join our BCBSIL Provider Network Consultant team for a 2021 Commercial Prior Authorization Reminders and Updates training. You'll get an overview of prior authorization and related requests for review – including how to check eligibility and benefits – with an emphasis on helping you prepare for the AIM Pharmacy Medical Oncology transition, effective Oct. 11, 2021. Register today by selecting your preferred session below:

- [Oct. 7, 2021 – 10 a.m. to noon](#)
- [Oct. 13, 2021 – 1 to 3 p.m.](#)

For More Information

Refer to the [Utilization Management section](#) of our Provider website for an updated **2021 Commercial Specialty Pharmacy Prior Authorization Drug List**. This list is posted on the [Support Materials \(Commercial\) page](#). It includes the drugs for Medical Oncology that AIM will review starting Oct. 11, 2021. Also refer to the [Resources page on AIM's website](#) for clinical guidelines, frequently asked questions and more.

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.

AIM Specialty Health (AIM) is an independent company that has contracted with BCBSIL to provide utilization management services for members with coverage through BCBSIL. 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 any products or services provided by third party vendors such as AIM or Availity.

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BLUE REVIEWSM

A Provider Publication

October 2021

Are you using these shared decision-making aids?

Shared decision-making is a communications process. It's a way for providers and patients to make informed health care decisions that align with what matters most to patients. Below are resources to help you involve your patients in shared decision-making.

These evidence-based aids provide information about treatment options, lifestyle changes and outcomes. They don't replace your guidance but can help your conversations with patients.

Why it's important: When patients help make decisions about their health care, it can lead to improved patient experience, better outcomes and quality of life.

Mayo Clinic Knowledge and Evaluation Research [Unit Care That Fits Tools](#)

- [Anticoagulation Choice](#)
- [Cardiovascular Primary Prevention Choice](#)
- [Chest Pain Choice](#)
- [Depression Medication Choice](#)
- [Graves Disease Treatment Choice](#)
- [Diabetes Medication Choice](#)
- [Head CT Choice](#)
- [Osteoporosis Choice](#)
- [Percutaneous Coronary Intervention Choice](#)
- [Smoking Cessation Around the Time of Surgery](#)
- [Rheumatoid Arthritis Choice](#)
- [Statin Choice](#)

The list is also on our [website](#).

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

A Provider Publication

October 2021

Earn CME/CEU Credit at Free Webinar on Comorbid Conditions

October is **National Depression and Mental Health Screening Month**. Join our board-certified psychiatrists and behavioral health medical directors for a one-hour webinar on comorbid behavioral health and physical health conditions. The free webinar is on **Monday, Oct. 25, 2021, at 8 a.m., CT**. Those attending will earn one continuing medical education (CME) credit or continuing education unit (CEU).

The webinar will provide a high-level overview of the epidemiology of comorbid medical and mental health conditions and how they impact each other. This introductory training focuses on behavioral health in the primary care setting, with treatment options across various care settings.

How do I attend?

Registration is required. Visit our [Webinars and Workshops](#) page for more information and online registration. Or, [register now](#).

In case you missed it: A recording of our June 2021 webinar on depression in a primary care setting is available online. [Register or sign in here](#) and view the entire recording at no cost to earn one CME/CEU credit. The one-hour webinar offers a high-level overview of depression and measurement-based care in a primary care setting.

Watch the [News and Updates](#) and our [Webinars and Workshops](#) page for details on these and other trainings.

The New Mexico Osteopathic Medical Association (NMOMA) is accredited by the American Osteopathic Association to provide osteopathic continuing medical education for physicians. NMOMA designates this program for a maximum of 1 AOA Category 1-A credits and will report CME and specialty credits commensurate with the extent of the physician's participation.

Social Work CEUs Approved by NASW-NM. The Licensee must maintain proof of continuing education courses taken for the past four (4) years. The New Mexico Regulations and Licensing Department, Boards and Commissions, Social Work Licensing Board reserves the right to audit a licensee's continuing education records as it deems necessary. This event has been approved for a total of 1 CEU.

Physicians (MDs and DOs), nurses, physician assistants, nurse practitioners and psychologists can use AOA Cat 1-4 credit toward licensure. Social workers and mental health counsellors (LPC, LCPC, LPCC) can use the Social Work CEU credit toward licensure.

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2021 Annual HMO and PPO HEDIS[®] Reports

Each year, Blue Cross and Blue Shield of Illinois (BCBSIL) reports audited Healthcare Effectiveness Data and Information Set (HEDIS) results. HEDIS is a nationally standardized set of measures related to important areas of care and service. Developed by the National Committee for Quality Assurance (NCQA), it is one of the most widely used set of health care performance measures in the U.S.

The 2021 BCBSIL HMO and PPO HEDIS Reports, which are based on 2020 data using HEDIS 2021 specifications, include measures across domains of care that reflect: effectiveness of care, access/availability of care and utilization.

The 2021 Quality Compass National Averages are provided to compare the commercial HMO and PPO's performance to the performance of other health care organizations submitting data to NCQA.

Audited HMO HEDIS results are reported for HMO Illinois[®], Blue Advantage HMOSM, Blue Precision HMOSM, BlueCare DirectSM and Blue FocusCareSM combined. The complete HMO and PPO HEDIS Reports are available in the [HEDIS Commercial](#) page of our Provider website.

HEDIS is a registered trademark of the NCQA.

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BLUE REVIEWSM

A Provider Publication

October 2021

Network Operations Update: Voicemail and Email Deactivation, Answers to Commonly Asked Questions

In an effort to streamline provider inquiries and improve administrative processes, the Blue Cross and Blue Shield of Illinois (BCBSIL) Network Operations team is retiring the following phone number/voicemail and email address: 312-653-6555, NetOps_provider_update@bcbsil.com.

This phone number/voicemail will be deactivated **this month** and the email address deactivation is slated for **December 2021**. We encourage you to visit our [Provider website](#) for the most up-to-date information. To help ensure a seamless transition, a sampling of commonly asked questions is included below.

How do I obtain a fee schedule?

Refer to our [Fee Schedule page](#) for a quick overview. (There's an online Fee Schedule Listing tool that may be accessed via the [Availity® Provider Portal](#). Or, refer to the [Forms page](#) and use the appropriate form under the Fee Schedule category to fax or mail your request.)

How do I apply for Electronic Funds Transfer (EFT)?

You can enroll online for EFT via the [Availity Provider Portal](#). Visit our [Claim Payment and Remittance page](#) for details. If you have questions, email our [Electronic Commerce Services team](#).

How do I obtain my 1099 form?

Email your request to our [1099 Inquiries](#) team.

How do I add a provider to my group?

If you need to add a provider to your current contracted group, complete our online [Provider Onboarding Form](#) to initiate the process.

How do I check the status of my application?

To check the status of your Provider Onboarding Form application, use our online [Case Status Checker](#). Enter the case number received in your confirmation email.

How do I request corrections to my provider demographic information?

If you need to change existing demographic information [e.g., legal name; National Provider Identifier (NPI)/Tax ID; physical address(s), phone/fax number, email, hours of operation, etc.], complete our online [Demographic Change Form](#).

How do I update my facility office address?

Request this change using our online [Demographic Change Form](#).

How do I terminate a provider from my group?

Request this change using our online [Demographic Change Form](#).

How do I terminate my contract?

Request this change using our online [Demographic Change Form](#); include a copy of the termination letter.

How do I join the commercial HMO network?

BCBSIL doesn't contract directly with providers for our HMO products. Providers who would like to participate in our HMO network must contact a BCBSIL contracting HMO Medical Group or Independent Practice Association (IPA) in their area. Refer to the [Contracting page](#) on our website for more information, including a link to [View HMO Medical Group/IPA listing](#).

How do I contract for a dentist?

Email [Provider Support](#) to request a contract.

How do I request a roster of my providers?

Email our [Provider Roster Requests](#) team to request a current update roster; include your group name, NPI and Tax ID.

Whom do I contact if I have Provider Network Consultant (PNC) assignment questions, provider data/loading or onboarding form issues?

Information on [PNC assignments](#) is available on our website. If you have questions about these assignments, or if you're having issues with our online provider onboarding or demographic change request forms, email [Provider Relations](#); include all pertinent information.

Whom do I contact for help with claims issues?

Call Provider Customer Services using the number specific to your network inquiry.

- Commercial: 800-972-8088
- Government Programs:
 - **Blue Cross Community Health PlansSM (BCCHPSM)** – 877-860-2837
 - **Blue Cross Community MMAI (Medicare-Medicaid Plan)SM** – 877-723-7702
 - **Blue Cross Medicare AdvantageSM** – 877-774-8592

This article is not applicable for HMO.

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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:
<p>2021 Commercial Prior Authorization Reminders and Updates <i>Join our Provider Network Consultant team for an overview of how to navigate commercial, non-HMO prior authorization and related requests for review. We'll cover key dates, reminders and resources, with an emphasis on helping you prepare for a utilization management vendor change for Pharmacy Medical Oncology, effective Oct. 11, 2021.</i></p>	<p>Oct. 7, 2021 Oct. 13, 2021</p>	<p>10 a.m. to noon 1 to 3 p.m.</p>
<p>Availity® Authorizations Tool <i>We are hosting one-hour webinar sessions for providers to learn how to electronically submit inpatient and outpatient benefit preauthorization requests handled by BCBSIL using Availity's Authorizations tool.</i></p>	<p>Oct. 6, 2021 Oct. 13, 2021 Oct. 20, 2021 Oct. 27, 2021</p>	<p>11 a.m. to noon</p>
<p>Availity Claim Status <i>We are hosting complimentary webinars for providers to learn how to verify detailed claim status online using Availity's Claim Status tool.</i></p>	<p>Oct. 7, 2021 Oct. 14, 2021 Oct. 21, 2021 Oct. 28, 2021</p>	<p>11 to 11:30 a.m.</p>

<p>Availity Remittance Viewer and Reporting On-Demand <i>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.</i></p>	Oct. 28, 2021	1 to 2 p.m.
<p>BCBSIL Back to Basics: 'Availity 101' <i>Join us for a review of electronic transactions, provider tools and helpful online resources.</i></p>	Oct. 12, 2021 Oct. 19, 2021 Oct. 26, 2021	11 a.m. to noon
<p>BCCHPSM and MMAI Required Provider Training Webinars <i>If you provide care and services to our Blue Cross Community MMAI (Medicare-Medicaid Plan)SM and/or Blue Cross Community Health PlansSM (BCCHP) members, please join us for guided webinars that will review all the provider trainings required by the Centers for Medicare & Medicaid Service (CMS) and/or Illinois Department of Healthcare and Family Services (HFS).</i></p>	Oct. 6, 2021 Oct. 20, 2021	9 to 11 a.m. 1 to 3 p.m.
<p>Comorbid Physical and Mental Health Conditions <i>Join our board certified psychiatrists and behavioral health medical directors for a one-hour webinar on comorbid behavioral health and physical health conditions. Those who attend will earn one continuing medical education credit (CME) or continuing education unit (CEU).</i></p>	Oct. 25, 2021	8 a.m. to 9 a.m.
<p>Medicaid HEDIS[®] 101 Training <i>This training will cover a wide range of quality improvement topics and resources to help improve Healthcare Effectiveness Data and Information Set (HEDIS) rates.</i></p>	Oct. 13, 2021 Oct. 27, 2021	Noon to 1 p.m.
<p>Medicaid HEDIS 102 Training <i>This training is designed for contracted providers working with new BCCHP and MMAI members. We'll review HEDIS measure updates, discuss strategies to sharpen your knowledge of HEDIS measures, and cover the measure year (MY) 2020 and MY 2021 HEDIS technical specifications and general guidelines.</i></p>	Oct. 19, 2021	Noon to 1 p.m.
<p>Monthly Provider Hot Topics Webinar <i>These monthly webinars will be held through December 2021. 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.</i></p>	Oct. 13, 2021	10 to 11 a.m.
<p>Orientation Webinars for New BCCHP and MMAI Providers <i>These orientation webinars will give you the opportunity to ask the</i></p>	Oct. 12, 2021 Oct. 19, 2021	10 to 11 a.m. 10 to 11:30 a.m.

PNCs questions and will highlight topics such as care coordination, third party vendors, claims, prior authorization and required provider training.

Orientation Webinars for New Commercial Providers

[Oct. 20, 2021](#)

10 to 11:30 a.m.

These orientation webinars will give you the opportunity to ask the PNCs questions and will highlight topics such as network participation and benefits, claims, post-processing claim inquiries, supplemental resources, credentialing and contracting.

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October 2021

Procedure Code and Fee Schedule Updates

As part of our commitment to help inform our independently contracted providers of certain developments, Blue Cross and Blue Shield of Illinois (BCBSIL) has designated a specific section in the *Blue Review* to notify you of any significant changes to the physician fee schedules.

On Jan. 1, 2022, BCBSIL will implement Current Procedural Terminology (CPT[®]) and Healthcare Common Procedure Coding System (HCPCS) procedure code additions, deletions and revisions. Please note that deleted codes will not be accepted for payment for dates of service on or after Jan. 1, 2022.

The information above is not intended to be an exhaustive listing of all changes. For more information on the above change(s), use our Fee Schedule Request Form and specifically request the updates on the codes listed in the *Blue Review*. Annual and quarterly fee schedule updates may be requested by using the Fee Schedule Request Form. The downloadable form is available on the [Forms page](#) on our Provider website. Professional providers participating in our Preferred Provider Option (PPO) and Blue Choice PPOSM networks may use the [Fee Schedule Listing tool](#) on the Availity[®] Provider Portal to submit electronic requests and receive the contracted price allowance for specific codes.

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