

BLUE REVIEWSM

A newsletter for contracting institutional and professional providers

September 2018

■ CMO Perspective

Health Equity: Celebrating Diversity, Finding Common Ground

Stephanie Vomvouras, M.D. MBA, Vice President – Health Care Delivery and Chief Medical Officer introduces this month's article as follows: *According to the World Health Organization, 'Health inequities are systematic differences in the health status of different population groups' which 'have significant social and economic costs both to individuals and societies.' But this is not only a problem for developing countries. Within our own communities in Illinois, wide health disparities exist.*

[Read More](#)

■ Wellness and Member Education

Improved Results, but the Opioid Epidemic Remains a Critical Health Crisis in America

In its latest Health of America Report, [The Opioid Epidemic in America: An Update](#), the Blue Cross and Blue Shield Association reports that 223,000 Blue Cross and Blue Shield members across the country received an opioid use disorder diagnoses in 2017.

[Read More](#)

■ Provider Education

Opioid Use Disorder Will be Discussed at Blue UniversitySM Event

Blue Cross and Blue Shield of Illinois (BCBSIL) has created a complimentary provider education program called Blue University, which provides a platform to engage industry providers in timely discussions that drive the current health care market. On Oct. 9, 2018, a Blue University event will be held to discuss Opioid Use Disorder.

[Read More](#)

Meet Your New PPO Provider Network Consultant (PNC) Team

BCBSIL continues to expand its products and networks to better serve our members. New products and networks also affect how our independently contracted providers do business with us. To help ensure we continue to deliver the service and support our contracted providers need, we have aligned our PPO PNCs into teams of subject matter experts.

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Government Programs Providers: We Want Your Feedback

Your Government Programs Professional PNC is available to provide training and discuss BCBSIL policies and procedures, billing and contractual or operational issues. Your thoughts, comments, questions and concerns are important to us. We've developed an online survey to give you an opportunity to provide feedback on your interaction with your PNC.

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Provider Learning Opportunities

BCBSIL provides complimentary educational workshops and webinars with an emphasis on electronic transactions, provider tools and helpful online resources. A list of upcoming training sessions is included in this month's issue.

[Read More](#)

■ Focus on Behavioral Health

Electronic Options Training Webinar for Behavioral Health Providers

BCBSIL is excited to offer complimentary online training sessions customized for behavioral health providers and their support staff. These webinars will demonstrate electronic transactions that can be conducted via the Availity® Provider Portal. Two webinar sessions will be offered in October 2018 for your convenience.

[Read More](#)

HEDIS® Measure for Follow-up After Hospitalization for Mental Illness

The BCBSIL Behavioral Health Program is intended to support the service and treatment that members receive from contracted health care providers. Related to the Healthcare Effectiveness Data and Information Set (HEDIS) measure for follow-up after hospitalization for mental illness, we'd like to offer a few tips and strategies you may want to apply with your patients.

[Read More](#)

■ Claims and Coding

Important Reminder: Claims Will Deny if Rendering NPIs are not on File with BCBSIL

It is important that your provider record on file with BCBSIL is accurate and up-to-date. In addition to the billing National Provider Identifier (NPI) and other demographic information for your group, your provider record must be updated to include the rendering NPIs of all individual providers associated with your group.

[Read More](#)

■ Electronic Options

New Application Process to Join Our Networks

BCBSIL welcomes providers to join our networks. We want to help make the application process as efficient and quick as possible. Therefore, effective Oct. 22, 2018, prospective providers will be able to fill out our new Provider Onboarding Form *online*. The change will help streamline the application process and possibly expedite the response time.

[Read More](#)

Government Programs: Electronic Claim-related Process Improvements and Reminders

Effective Sept. 15, 2018, BCBSIL will implement claim processing changes for electronic Medicare Advantage and Illinois Medicaid claims to resolve membership validation and duplicate claim rejections. With this implementation, some providers may encounter new claim submission edits, which will help improve accuracy and timeliness in processing.

[Read More](#)

■ 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. These policies may impact your reimbursement and your patients' benefits.

[Read More](#)

ClaimsXten™ Quarterly Updates

New and revised Current Procedural Terminology (CPT®) and Healthcare Common Procedure Coding System (HCPCS) codes are periodically added to, or deleted from, the ClaimsXten code auditing tool software by the software vendor.

[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 [Workshops/Webinars](#) page.



[Print](#) this month's newsletter in its entirety.



Contact Us

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

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Health Equity: Celebrating Diversity, Finding Common Ground

An introductory message from [Stephanie Vomvouras, M.D. MBA, Vice President – Health Care Delivery and Chief Medical Officer](#):

According to the World Health Organization, 'Health inequities are systematic differences in the health status of different population groups' which 'have significant social and economic costs both to individuals and societies.'¹ But this is not only a problem for developing countries. Within our own communities in Illinois, wide health disparities exist.² Whether access to care or disparities in preventive care screening, awareness is the first step towards developing actionable solutions. Please join us in our efforts to reduce health disparities, to ensure that our members, your patients, achieve maximum health.

More on Health Equity

In a welcome message to attendees at the second annual Health Care Service Corporation Health Equity Summit, hosted by Blue Cross and Blue Shield of Illinois (BCBSIL) this June, Derek J. Robinson, M.D., MBA, FACEP, CHCQM, Vice President, Enterprise Quality and Accreditation provided a concise definition of health equity, which “simply means everyone has a fair and just opportunity to be as healthy as possible.” The Summit brought together industry and community thought leaders to explore opportunities for addressing health care disparities that present barriers to achieving health equity, such as differences in the quality of care, access to care, or insurance coverage for distinct segments of the population.

A panel of national experts on health equity spoke about implicit or unconscious bias, the future of medical education and the role of innovation, education and community involvement in improving health equity. Panelists cited research and presented their personal experiences and perspectives on the influence of social and environmental determinants on health outcomes. They emphasized the need to start small because the problem of inequity is multifaceted and far-reaching, involving complex overlapping social structures, such as socioeconomic status (income level, education/literacy, occupation), ZIP code and housing conditions, public safety, and availability of/access to transportation, healthy food and clean water, among other factors.

Starting small can mean increasing community involvement, awareness and openness. Patient-centric factors such as language proficiency, cultural beliefs and/or socioeconomic factors may impact patient understanding, access and adherence to care plans. For example, if they can't communicate or feel they are not being heard, individuals with limited English proficiency may be less likely to seek care and adapt accordingly. It's important to recognize that there are factors that exist for each patient outside their doctor's office that may contribute to health care disparities, such as access to transportation, healthy food or a pharmacy.

Affordability CuresSM

Despite rapid advances in health care, many Americans are still struggling to pay for health insurance. At BCBSIL, we know it's time to put research into action and we are committed to increasing awareness of health disparities, forming partnerships and finding innovative solutions to help remove barriers and improve access to affordable, quality health care for all of our members. In June 2018, as part of our Affordability Cures initiative, BCBSIL announced plans to launch customized programs to help our members improve their health, manage costs and become active participants in their own health and wellness. This whole-person approach to care management and wellness includes proactive clinical and multi-disciplinary team outreach, as well as digital engagement models to provide dedicated guidance and support.

Building on the momentum from the second annual Health Equity Summit, one of the priority areas of the Affordability Cures initiative is to help increase capacity and better connect members to resources related to housing, transportation and food. BCBSIL is partnering with local community organizations and others to scale long-term solutions. Additional priorities include bringing together enhanced behavioral and physical health coordination and outreach solutions that may help address critical conditions such as addiction and substance abuse. These solutions will include improved connections to onsite wellness services and behavioral health resources such as virtual visits, improving analytics and reporting and providing new consumer navigation tools. The Affordability Cures initiative also involves accelerating adoption of ways to improve exchange of health information across a broad array of health care providers and community resources to create a more complete picture of an individual's health.

These efforts will help build on existing community initiatives aimed at improving the quality of life in neighborhoods where our members live, work and play. Our Center for Collaborative Studies, which conducts research with leading academic institutions, medical societies, providers and community-based organizations, will evaluate and measure the long-term impact of the investments to improve affordability. Additional information and future updates on Affordability Cures are available at affordabilitycures.com. We also invite you to view our [2017 Social Responsibility Report](#) for more information on existing programs, partnerships with community organizations and health policy advocacy efforts.

Health care is a caring profession by nature, but we're all human and we all have blind spots, or implicit or unconscious biases. It's time to assume there are disparities and look for them, while continuing to honor diversity and the unique attributes that identify individuals as part of certain patient populations. At the same time, however, it seems critical to celebrate potential similarities across populations. What separates us? What brings us together? How can we find the common ground? Tony Vancauwelaert, M.D., FAAFP and medical director for BCBSIL elaborates further: "Medicine is an art and a science. The 'science' enables providers to know the most current evidence-based medicine. The 'art' is how to apply the science to each individual with a holistic approach, addressing and incorporating any health care disparities into the treatment plan."

Thank you for your dedication to providing individualized care to support the health and wellness of our members, which in turn affects the health and wellness of families, communities, patient populations and generations to come.

¹ World Health Organization, 10 facts on health inequities and their causes. Updated April 2017. http://www.who.int/features/factfiles/health_inequities/en/

² Illinois Department of Public Health, Disparities Report, 2009 - 2014 Figures. Released April 2017. <http://www.dph.illinois.gov/sites/default/files/publications/publicationscmhhealth-disparities-report.pdf>

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Improved Results, but the Opioid Epidemic Remains a Critical Health Crisis in America

In its latest Health of America Report, [The Opioid Epidemic in America: An Update](#),¹ the Blue Cross and Blue Shield Association (BCBSA) reports that 223,000 Blue Cross and Blue Shield (BCBS) members across the country received an opioid use disorder (OUD) diagnoses in 2017. This is an average of 5.9 diagnoses per 1000 members, which is a decrease from the five-year high of 6.2 diagnoses per 1000 BCBS members in 2016.²

OUD diagnoses are linked to dosage strength and prescription duration.² On a positive note, BCBSA members' opioid usage within the Centers for Disease Control and Prevention (CDC) recommended dose and duration guidelines of less than seven days and under 50 morphine milligram equivalents (MME) increased to 45 percent in 2017 from 39 percent in 2013.²

In addition, for BCBS members nationally, the overall number of opioid prescriptions has declined significantly by 29 percent since 2013.² The largest decrease in opioid prescriptions was seen in the past two years and the number of BCBS members who filled at least one opioid prescription is down by 25 percent since 2013.²

Closer to home, many of our Illinois members have felt the impact of the opioid crisis in their lives and communities. Blue Cross and Blue Shield of Illinois (BCBSIL) cares about the health and well-being of our more than 8.1 million members, and we take this crisis and our role in addressing it seriously.

BCBSIL follows nationally accepted, evidence-based guidelines in providing benefits for the care and treatment of individuals suffering from OUD. BCBSIL aligns its programs to CDC opioid guidelines and relies on a team of pharmacists, doctors, behavioral health specialists, case managers, along with fraud, waste and abuse investigators through the [Controlled Substance Integration \(CSI\) program](#) to stop opioid overuse, identify potential abuse, and promote appropriate treatment.

BCBSIL believes one of the greatest impact comes from helping members with the proper use and disposal of prescription opioid medication. We do this by building on our relationships with members, care providers and pharmacists. We're also creating new partnerships to help address the opioid crisis in the communities where our members live, work and play. And we are partnering with [Walgreens in Illinois](#) to make it easier to safely dispose of unwanted medication.

BCBSIL also continues to work with policymakers at the state and local level to find solutions to the opioid crisis as well as advocate on behalf of our members throughout Illinois suffering from opioid use disorder.

[The Opioid Epidemic in America: An Update](#) is the 21st study of the [Blue Cross Blue Shield: The Health of America Report](#)[®] series, a collaboration between BCBSA and [Blue Health Intelligence](#)[®], which uses a market-leading claims database to uncover key trends and insights into health care affordability and access to care.¹

¹This report builds upon and provides updated results on a previously published BCBS Health of America report from 2017 entitled, "America's opioid epidemic and its effect on the nation's commercially-insured population." It is based on the prescription and medical claims of over 41 million commercially insured BCBS members. In this report, "opioids" include prescription opioid medications. Members diagnosed with cancer who were undergoing palliative or hospice care were excluded from this analysis. For more information on how BCBS is addressing America's opioid epidemic, see: <https://www.bcbs.com/the-health-of-america/addressing-americas-opioid-addiction>

²The Opioid Epidemic in America: An Update, BCBSA, July 12, 2018, <https://www.bcbs.com/the-health-of-america/reports/the-opioid-epidemic-america-update>

The information mentioned here is for informational purposes only and is not a substitute for the independent medical judgment of a physician. Members should refer to their certificate of coverage for more details, including benefits, limitations and exclusions. Regardless of benefits, the final decision about any medication is between the member and their health care provider.

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Opioid Use Disorder Will be Discussed at Blue UniversitySM Event

At Blue Cross and Blue Shield of Illinois (BCBSIL) we are engaging with providers as partners to help reduce costs, improve quality and maintain member satisfaction. As partners, it is essential that we look for ways to strengthen our relationships and provide value that is beneficial to each other.

To foster this partnership, BCBSIL has created a complimentary provider education program called Blue University, which provides a platform to engage industry providers in timely discussions that drive the current health care market. This is an opportunity to bring the focus to and educate on trends, best practices, and emerging concerns that may have the largest impacts to our members and providers. Topics may include cultural competence, health literacy, transition of care, behavioral health, medication adherence, relationship-centered care and more.

On Oct. 9, 2018, a Blue University event will be held to discuss Opioid Use Disorder (OUD). The following best practices for OUD will be discussed:

- Identify signs, symptoms and other risk factors associated with OUD
- Managing patients with OUD in terms of specialty care, case management and other support services
- Recognize the importance of an integrated and holistic behavioral health and clinical approach to OUD

The event will be held at BCBSIL, 300 E. Randolph St., Chicago. Check-in will begin at 8 a.m. with breakfast and networking. The presentation will follow from 9 a.m. to 2 p.m. with lunch served. Due to a limited number of seats, reservations are available on a first come, first served basis. [Register today](#) for the Oct. 9, 2018, Blue University program.

What's best for the member is the ultimate driver. Access to the right care, at the right place, and at the right time for the most effective experience and best health outcomes is very important. Through the Blue University provider education program, BCBSIL is striving to help improve the affordability of care for our members through a diverse and quality provider network. Together, we can help raise the standard and better help our members navigate the health care system.

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Meet Your New PPO Provider Network Consultant (PNC) Team

Blue Cross and Blue Shield of Illinois (BCBSIL) continues to expand its products and networks to better serve our members. New products and networks also affect how our independently contracted providers do business with us. We have been working to help ensure we continue to deliver the service and support our contracted providers need.

To help meet those needs, we have aligned our PPO Provider Network Consultants (PNCs) into teams of subject matter experts. Instead of just one PPO PNC, our regional support teams will be equipped to research and respond to your inquiries in a more timely and comprehensive manner. Additionally, our teams will be offering more training and education aimed at helping improve providers' experience with BCBSIL.

Each PPO PNC team continues to serve as liaisons between BCBSIL and our independently contracted professional provider community. Your PPO PNC team is available to provide education on BCBSIL procedures, support provider contract compliance and work with each practice to help resolve any operational concerns. In addition, PNCs specialize in investigating issues, producing data and developing solutions. This dedicated staff has a thorough knowledge of all BCBSIL PPO products, programs and initiatives.

Join Us for a Virtual Provider Workshop

Virtual provider workshops will be hosted throughout the year. Look to the [Workshops/Webinars section](#) of our Provider website and the [Provider Learning Opportunities](#) section of the *Blue Review* for upcoming dates and registration links.

How to Contact Your PNC Team

You can contact your assigned PPO PNC team by using the [Professional Provider Network Consultant List](#). Each demographic region has an assigned email address managed by the PNC team dedicated to that area. Inquiries are monitored daily and responses are provided within five business days.

As a general reminder, please ensure all necessary information is provided. This includes call reference number or Claim Inquiry Resolution (CIR) Tracking ID. For inquiries related to credentialing, include the Tax ID, billing National Provider Identifier (NPI), rendering provider name, license number, rendering provider NPI and Council for Affordable Quality Healthcare (CAQH[®]) number.

If you need help identifying your designated PNC team, email ProviderRelations@bcbsil.com along with your provider name, NPI, Tax ID, city and county.

CAQH is an independent third party not-for-profit collaborative alliance of the nation's leading health plans and networks. The mission of CAQH is to improve health care access and quality for patients and reduce administrative requirements for physicians and other health care providers and their office staffs. CAQH is solely responsible for its products and services, including the ProView database.

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Government Programs Providers: We Want Your Feedback

This article applies to professional providers who are contracted with us to provide care and services to our government programs – Medicare Advantage and Illinois Medicaid – members. This includes Blue Cross Medicare Advantage (PPO)SM, Blue Cross Medicare Advantage (HMO)SM, Blue Cross Community Health PlansSM and Blue Cross Community MMAI (Medicare-Medicaid Plan)SM members.

At Blue Cross and Blue Shield of Illinois (BCBSIL), we appreciate the service you provide to our Medicare Advantage and Illinois Medicaid members and we hope to be here for you when you need our help. Your Government Programs Professional Provider Network Consultant (PNC) is available to provide training and discuss BCBSIL policies and procedures, billing and contractual or operational issues.

Your thoughts, comments, questions and concerns are important to us so our Government Programs Provider Network team has developed an online survey to provide you with an opportunity to give us feedback as it relates to your interaction with your PNC.

For those providers with assigned PNCs, a link to the PNC survey will be emailed to you on a quarterly basis. This is an excellent opportunity to help us determine the level of satisfaction you have with your PNC as well as add improvements to our meeting and agenda structure. We are also interested in learning which areas you are most satisfied. The information you provide will be confidential.

If you have additional comments, suggestions or service issues that are not addressed in the survey, please feel free to use the additional comments section in the survey to convey them. If you do not wish to remain anonymous or would like a follow up call, you can use this section to add your name and phone number.

The survey should take no more than five minutes. Please complete and submit your response to the online survey within two weeks of receipt via email.

We value your time and appreciate your feedback to help us improve our service to you.

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Provider Learning Opportunities

Blue Cross and Blue Shield of Illinois (BCBSIL) provides complimentary educational workshops and webinars with an emphasis on electronic options that can help create administrative efficiencies for the independently contracted providers who conduct business with us. A snapshot of upcoming training sessions is included below. For additional information, refer to the [Workshops/Webinars page](#) on our Provider website.

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' <i>Join us for a review of electronic transactions, provider tools and helpful online resources.</i> | Sept. 4, 2018 Sept. 11, 2018 Sept. 18, 2018 Sept. 25, 2018 | 11 a.m. to noon |
| Introducing Remittance Viewer <i>Have you heard? This online tool gives providers and billing services a convenient way to retrieve, view, save or print claim detail information.</i> | Sept. 13, 2018 | 11 a.m. to noon |
| iExchange® Training: New Enrollee Training <i>Learn how to gain access to and begin using our online benefit preauthorization/predetermination of benefits tool.</i> | Sept. 27, 2018 | 11 a.m. to 12:30 p.m. |
| Blue Cross Community Health PlansSM for Behavioral Health/Medical Providers <i>Learn about our new 2018 Medicaid product</i> | LTC, SMHRF, SLF Provider Types: | 10 to 11 a.m. |

| | | |
|--|--|------------------------|
| <p><i>This webinar is intended for the following provider types: Community Mental Health Centers (CMHC), Substance Use Prevention and Recovery (SUPR), Federally Qualified Health Center (FQHC), Rural Health Clinic (RHC), Medical Group/Independent Practice Association (MG/IPA), Long Term Supports and Services (LTSS), Primary Care Physician (PCP), School Based Clinic (SBC), Specialist</i></p> | <p>Sept. 11, 2018 Sept. 25, 2018</p> <p>Home Health, Hospice, DME, Home Infusion, Dialysis Provider Types: Sept. 11, 2018 Sept. 25, 2018</p> | <p>Noon to 1 p.m.</p> |
| <p>Professional PPO Provider Virtual Workshop <i>Learn about our new 2018 Medicaid product</i></p> <p><i>These webinars are customized for the BCBSIL commercially contracted professional 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> | <p>Sept. 6, 2018 Oct. 11, 2018 Nov. 8, 2018 Dec. 13, 2018</p> | <p>11 a.m. to noon</p> |

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 at availity.com for details; or call Availity Client Services at 800-AVAILITY (282-4548) for assistance.

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Electronic Options Training Webinar for Behavioral Health Providers

Blue Cross and Blue Shield of Illinois (BCBSIL) is excited to offer complimentary online training sessions customized for behavioral health providers and their support staff. These webinars will demonstrate electronic transactions that can be conducted via the Availity[®] Provider Portal. Two webinar sessions will be offered in October 2018 for your convenience.

Did you know many behavioral health inquiries answered by BCBSIL Customer Advocates can be handled through online transactions? These customized training sessions will introduce you to a user friendly, practical solution to help reduce your phone calls and support your growing practice demands.

Covered topics will include:

- How to obtain real-time eligibility and benefits online
- Determination of preauthorization requirements
- Online claim status verification

To register for a training session, click on the date and time below. After your registration request has been approved, you'll receive instructions for joining the meeting.

[Oct. 10, 2018 – 10 to 11:30 a.m.](#)

[Oct. 17, 2018 – 11 to 12:30 p.m.](#)

If you are not an Availity registered user, you can sign up today at availability.com. To learn more about electronic options, visit the [Provider Tools page](#) on our Provider website.

Checking eligibility and/or benefit information 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.

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HEDIS[®] Measure for Follow-up After Hospitalization for Mental Illness

As part of a quality initiative to help assess effectiveness of care and services to our members, Blue Cross and Blue Shield of Illinois (BCBSIL) uses specifications published by the National Committee for Quality Assurance (NCQA) for Healthcare Effectiveness Data and Information Set (HEDIS). HEDIS is one of the most widely used and nationally accepted effectiveness of care measurements available.

Did You Know?

- Nearly one in five U.S. adults lives with a mental illness (44.7 million in 2016).¹
- Four percent of young adults reported forgoing behavioral health care in the past year, despite self-reported behavioral health needs.²
- Despite the availability of effective evidence-based treatment, about 40 percent of individuals with serious mental illness do not receive care and many who begin an intervention fail to complete it.³

Measurement Structure

The HEDIS measure for follow-up after hospitalization for mental illness is a quality metric for members age 6 and older who have had an inpatient behavioral health-related admission. The HEDIS measure is one treatment episode within seven and 30 days after discharge. The treatment episode can be an outpatient visit (including intensive outpatient or partial hospital program), or a telehealth visit.

Tips and Strategies

We appreciate the care and services you provide to help improve the health and well-being of our members. The BCBSIL Behavioral Health Program is intended to support the service and treatment that members receive from contracted health care providers. Below are a few tips and strategies you may want to apply with your patients.

- Ensure your patients have follow-up appointments with a qualified in-network behavioral health provider within the specified time frame, as noted above.
 - Qualified behavioral health providers include the following provider types: psychiatrist, psychologist, licensed clinical social worker (LCSW), licensed clinical professional counselor (LCPC) and licensed marriage and family therapist (LMFT).
- Attempt to alleviate barriers to attending appointments and following treatment recommendations prior to discharge.
- Ensure your patients have adequate access to prescribed medications.
- Discuss with your patients the importance of therapeutic engagement and coordination of care with other health care

providers.

- Begin discharge planning at admission and use BCBSIL case management for assistance with your patients' needs.
- Ensure the patient's discharge paperwork is sent to the appropriate outpatient provider within 24 hours.

To contact BCBSIL Behavioral Health Case Management, call the Customer Service number on the member's ID card.*

****For commercial HMO members, all behavioral health services (mental health and substance use disorders) are managed by the member's Medical Group/Independent Practice Association (MG/IPA).***

¹Mental Illness, National Institute of Mental Health, <https://www.nimh.nih.gov/health/statistics/mental-illness.shtml>

²Data on behavioral health in the United States, American Psychological Association, <http://www.apa.org/helpcenter/data-behavioral-health.aspx>

³Stigma as a Barrier to Mental Health Care, Association for Psychological Science, <https://www.psychologicalscience.org/news/releases/stigma-as-a-barrier-to-mental-health-care.html>

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HEDIS is a registered trademark of NCQA

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Important Reminder: Claims Will Deny if Rendering NPIs are not on File with BCBSIL

The following information does not apply to government programs (Medicare Advantage and Illinois Medicaid) claims.

It is important that your provider record on file with Blue Cross and Blue Shield of Illinois (BCBSIL) is accurate and up-to-date. In addition to the billing National Provider Identifier (NPI) and other demographic information for your group, your provider record must be updated to include the rendering NPIs of all individual providers associated with your group. If claims are submitted for services rendered by providers who are not associated with your provider group according to our records, those claims will be denied.

As announced last month in our online [News and Updates](#), beginning Sept. 1, 2018, when a claim is denied due to not having an NPI on file or if the rendering NPI on file is not associated with the billing provider's NPI on file, a denial message will appear on the Electronic Payment Summary (EPS) or paper Provider Claim Summary (PCS). The denial message will include a reminder that updates to the billing provider's record on file must be completed prior to resubmitting the claim.

For providers who receive the Electronic Remittance Advice (ERA), they will see the following Claim Adjustment Group Code (CAGC), Claim Adjustment Reason Code (CARC) and the Remittance Advice Remark Code (RARC):

- CO – Claim Adjustment Group Code
- A1 – Claim/Service Denied
- N290 – Missing/Incomplete/Invalid rendering provider primary identifier

How to Update Your NPI Information on File with BCBSIL

To request addition of providers to your current contracted group or to request other changes to your existing demographic information on file with BCBSIL, refer to the [Information Change Request page](#) of our Provider website.

If you have questions, contact your BCBSIL Provider Network Consultant for assistance.

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BLUE REVIEWSM

A newsletter for contracting institutional and professional providers

September 2018

New Application Process to Join Our Networks

Blue Cross and Blue Shield of Illinois (BCBSIL) welcomes providers to join our networks. We want to help make the application process as efficient and quick as possible. Therefore, effective Oct. 22, 2018, prospective providers will be able to fill out our new Provider Onboarding Form *online*. The change will help streamline the application process and possibly expedite the response time.

As of Oct. 22, 2018, you may use the new Provider Onboarding Form if you are:

- An individual provider new to our networks
- A group or clinic new to our networks
- An existing contracted group or clinic that is adding a new provider

Note: You must provide services in Illinois or Lake County, Indiana to apply. Providers who wish to join the commercial HMO (HMO Illinois[®], BlueAdvantage HMOSM, Blue Precision HMOSM, Blue FocusCareSM) and/or Medicare Advantage networks must first be contracted with one of our participating HMO Medical Groups or Independent Practice Associations (IPAs). Please note that Medicare Advantage includes Blue Cross Medicare Advantage (HMO)SM and Blue Cross Medicare Advantage (PPO)SM.

As of Oct. 22, 2018, providers will find the new electronic onboarding form, additional information and instructions on our Provider website on the [Join Our Network](#) page. Questions? Email netops_provider@bcbsil.com for assistance.

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Government Programs: Electronic Claim-related Process Improvements and Reminders

The notice applies to providers submitting Blue Cross and Blue Shield of Illinois (BCBSIL) government programs claims for services rendered to our Medicare Advantage and Illinois Medicaid members. This includes Blue Cross Medicare Advantage (PPO)SM, Blue Cross Medicare Advantage (HMO)SM, Blue Cross Community Health PlansSM and Blue Cross Community MMAI (Medicare-Medicaid Plan)SM members.

Providers submitting electronic government programs claims for our Medicare Advantage and Illinois Medicaid members may have experienced membership validation claim rejections and duplicate claim rejections. The duplicate claim rejections occurred when Professional and Institutional electronic claims (837P and 837I transactions) were resubmitted within 90 days of a previously submitted claim that included the exact data for the same patient and date(s) of service.

Effective Sept. 15, 2018, BCBSIL will implement claim processing changes to eliminate the above-referenced claim rejection issues. With this implementation, some providers may encounter new claim submission edits for Professional and Institutional claims (837P and 837I transactions), which will help improve accuracy and timeliness in processing. Claims with insufficient or invalid data will reject upon claim submission, allowing providers to correct the error(s) and resubmit the claim immediately, thereby avoiding claim processing delays. Additionally, for electronic claims submitted by 5 p.m. (CT), submitters should receive their payer acknowledgement response files on the same day.

These changes will not impact electronic fund transfer (835 EFT) or electronic remittance advice (835 ERA) transactions.

As a reminder, electronic claims that are submitted via the Availity[®] Provider Portal or Experian Health must be submitted using Payer ID 66006 for Medicare Advantage and Payer ID MCDIL for Illinois Medicaid claims. For claims that are submitted using direct data entry on the Availity Portal, providers should select the drop-down payer option of “Blue Cross Medicare Advantage” for Medicare Advantage claims and “Blue Cross Community Health Plans” for Illinois Medicaid claims.

Providers who are not registered with Availity or Experian Health should contact their clearinghouses to confirm the appropriate Payer IDs to be used when submitting government programs claims, as other clearinghouses may assign their own unique numbers.

Please share this notice with your practice management/hospital information system software vendor, billing service or clearinghouse, if applicable. For additional information on electronic options, refer to the [Electronic Commerce page](#) on our Provider

website.

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. Experian Health is an independent third party vendor and is solely responsible for its products and services. BCBSIL makes no endorsement, representations or warranties regarding any products or services provided by third party vendors such as Availity and Experian Health. 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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Medical Policy Updates

Approved, new, or revised Blue Cross and Blue Shield of Illinois (BCBSIL) 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 impact 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 of our Provider website.

You may view active, new, and revised policies, along with policies pending implementation, by visiting the [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 may also 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. Just click on the title of the draft policy you wish to review, and then select "Comments" to submit your feedback to us.

Please visit the [Standards and Requirements](#) section of our Provider website for access to the most complete and up-to-date BCBSIL [Medical Policy](#) information. In addition to medical policies, other policies and information regarding payment may 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.

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ClaimsXtenTM Quarterly Updates

New and revised Current Procedural Terminology (CPT[®]) and Healthcare Common Procedure Coding System (HCPCS) codes are periodically added to, or deleted from, the ClaimsXten code auditing tool software by the software vendor on a quarterly basis and are not considered changes to the software version. Blue Cross and Blue Shield of Illinois (BCBSIL) will normally load this additional data to the BCBSIL claim processing system after receipt from the software vendor and will confirm the effective date via the News and Updates section of the BCBSIL Provider website. Advance notification of updates to the ClaimsXten software version also will be posted on the BCBSIL Provider website.

To help determine how some coding combinations on a particular claim may be evaluated during the claim adjudication process, you may continue to utilize Clear Claim ConnectionTM (C3). C3 is a free, online reference tool. Refer to the [Clear Claim Connection page](#) on our Provider website for additional information on gaining access to C3, as well as answers to [frequently asked questions](#) about ClaimsXten. Updates may be included in future issues of the [Blue Review](#). It is important to note that C3 does not contain all of the claim edits and processes used by BCBSIL in adjudicating claims, and the results from use of the C3 tool are not a guarantee of the final claim determination.

ClaimsXten and Clear Claim Connection are trademarks of McKesson Information Solutions, Inc., an independent company providing coding software to BCBSIL. McKesson Information Solutions, Inc. is solely responsible for the software and all the contents. Contact the vendor directly with any questions about the products, software and services they provide.

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