The Availity CareProfile (ACP) is an electronic health record sourced from claim-based information collected by Blue Cross and Blue Shield of Illinois (BCBSIL) from physicians, pharmacies, labs, and other health care providers. Providers who are registered with Availity can use the CareProfile to obtain a consolidated view of a patient’s health history at the point of care. This information can help you identify potential treatment issues, such as clinical gaps in recommended care services, missed prescription refills and possible drug-to-drug interactions.

The CareProfile includes the following details:

- Demographic patient information, including date of birth, address and phone number.
- Information about the patient’s current primary care physician (PCP), if applicable, and other providers visited in the past 27 months.
- Diagnoses and procedures submitted and reflected in the claims records.
- Professional, hospital and emergency room services reflected in the claims records.
- Prescriptions filled, including the class of the drug, total fills, and last date filled.
- Radiological and laboratory services reflected in the claim records (test results are not included at this time).

This document is intended to provide general guidance for using the CareProfile tool to view health information for BCBSIL members.

Getting Started

Primary Access Administrators (PAAs): Before your users can begin, you will need to grant them access by going to

Account Administration | Assign Access to Users | Manually Assigned | CareCost Estimator-BCBSIL

Users: Please confirm with your PAA that access to CareCost Estimator-BCBSIL has been granted.

Signing on to Availity

- Key in your user ID and password.
- Click Login.*

*To access CareProfile, you must be a registered Availity user.

Accessing the Tool (Option 1):

Once you log into Availity,

- Click on CareProfile,
- Then select CareProfile Inquiry.
Care Profile Inquiry
Next, you need to complete the CareProfile Inquiry. Then click Submit.

Accessing the Tool(Option 2):
Once you log into Availity,
- Click on Eligibility and Benefits,
- Then select Eligibility and Benefits Inquiry.
Eligibility and Benefits Inquiry

Next, you need to complete the Eligibility and Benefits Inquiry screen. If the member’s ID card has a magnetic strip, you may swipe it. After you swipe the card, some of the fields below will be filled. You must complete the remaining fields. Then click Submit.

* Provider: ?

Provider Information

* Organization: MCSC

* Express Entry - Provider: ? --- Select One ---

* Provider Type: --- Select One --- Please select based on the claim type/form submitted for the inquiry (Professional=500 claim or Facility/institutional=1500 claim).

* NPI: ? Individually practicing physicians who are NOT part of a clinic/group setting must always use the individual rendering NPI (Type1). Facility or professional providers practicing in a group setting must use the group/billing NPI (Type 2).

* City:

* State: --- Select One ---

* ZIP Code: --- Select One ---

* Place of Treatment: Office

Patient Information

* As of Date: ? 01 / 23 / 2018

* Type of Benefits Requested: ? Chemotherapy

* Search Option: ? Patient ID & DOB

* Patient ID: ?

* Patient Date of Birth: ? / ? / ?

* Patient’s Relationship to Subscriber: ? Self

* Patient Gender: ? --- Select One ---
Eligibility and Benefits Summary Results

For eligible members only, after you have completed a successful Eligibility and Benefits Inquiry, a CareProfile option will be available at the top and bottom of the screen for you to select.

CareProfile Disclaimer

After you have thoroughly reviewed the information, click on the I Agree button. This legal disclaimer will populate each time you want to submit a CareProfile inquiry for a patient.
CareProfile Summary Report

Once you accept the disclaimer information, a CareProfile Summary Report will populate on your screen with a summary of the patient information.

Availity CareProfile Summary Report

Age: 40  Gender: Female  Address: 4256 S LINDEN LANE
DOB: 11/21/1969  Phone: 01/01/2005
ID#:  B99SL  Phone: 1234
PCP:  PCP Phone:

Report generated on: 01/15/2010
Report based on services provided as of: 01/15/2010

Providers Seen

<table>
<thead>
<tr>
<th>Provider Name</th>
<th>Specialty</th>
<th>Phone #</th>
<th>Last Service Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>OPHTHALMOLOGY</td>
<td></td>
<td></td>
<td>06/10/2009</td>
</tr>
<tr>
<td>MULTISPECIALTY PHYSICIAN GROUP</td>
<td></td>
<td></td>
<td>08/21/2009</td>
</tr>
<tr>
<td>ANESTHESIOLOGY</td>
<td></td>
<td></td>
<td>09/01/2009</td>
</tr>
</tbody>
</table>

Medical Conditions

<table>
<thead>
<tr>
<th>Severity</th>
<th>Condition</th>
<th>Start Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low</td>
<td>Eye Disorder, Other</td>
<td>08/10/2009</td>
</tr>
<tr>
<td>Low</td>
<td>Shingles</td>
<td>07/06/2009</td>
</tr>
<tr>
<td>Low</td>
<td>Cerebral Tumor</td>
<td>06/24/2008</td>
</tr>
</tbody>
</table>

Medications

<table>
<thead>
<tr>
<th>Medication Class</th>
<th># Fills</th>
<th>Last Fill Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>DILTIAZEM LOMS ACTING</td>
<td>12</td>
<td>02/04/2006</td>
</tr>
<tr>
<td>ATORVASTATIN/ATOR</td>
<td>5</td>
<td>02/04/2006</td>
</tr>
<tr>
<td>METFORMIN</td>
<td>15</td>
<td>01/22/2006</td>
</tr>
</tbody>
</table>

Lab Results

<table>
<thead>
<tr>
<th>Date Collected</th>
<th>Test</th>
<th>Result</th>
<th>Normal Range</th>
<th>Rendering Provider</th>
<th>Class</th>
</tr>
</thead>
<tbody>
<tr>
<td>06/09/2006</td>
<td>Triglyceride</td>
<td>188 MGDL</td>
<td>0-140</td>
<td>LabCorp</td>
<td>Chemistry</td>
</tr>
<tr>
<td>06/09/2006</td>
<td>Cholesterol</td>
<td>41 MGDL</td>
<td>0-0</td>
<td>LabCorp</td>
<td>Chemistry</td>
</tr>
<tr>
<td>06/29/2006</td>
<td>Cholesterol</td>
<td>171 MGDL</td>
<td>100-195</td>
<td>LabCorp</td>
<td>Chemistry</td>
</tr>
<tr>
<td>06/29/2006</td>
<td>Cholesterol</td>
<td>96 MGDL</td>
<td>0-99</td>
<td>LabCorp</td>
<td>Chemistry</td>
</tr>
</tbody>
</table>

Monitored Services

<table>
<thead>
<tr>
<th>Service</th>
<th># Sesa</th>
<th>Last Service Date</th>
<th>Most Recent Pedi</th>
<th>Phone #</th>
</tr>
</thead>
<tbody>
<tr>
<td>BACTERIAL CULTURES, OTHER</td>
<td>3</td>
<td>07/01/2009</td>
<td>JOHN SMITH</td>
<td>111-222-3337</td>
</tr>
<tr>
<td>HEART ECHO EXAM</td>
<td>3</td>
<td>01/16/2008</td>
<td>DOUGIE HOWSER</td>
<td>111-222-3336</td>
</tr>
</tbody>
</table>

Emergency Room Visits

Patient had 0 Emergency Room visits in the past 12 months.

Health Status Measure

Health Status Measure indicates risk in the next 12 months.
The Health Status Measure score is 0 on a scale of 1 to 10. 1 is low, 10 is high.

Clinical Flags

Treatment Opportunities

- BEER MONITOR OF A1C
- REVIEW DOSING FREQUENCY OF MEDICATIONS
- PREVENTATIVE HEALTH AND WELNESS

Age 50 and older and no colonoscopy in the past 24 months
CareProfile Data Description and Online Transaction Tips

The sections on the CareProfile cover these categories of information:

- **Providers Seen** – This section lists all provider visits where a claim has been adjudicated during the given time period, including but not limited to visits to physicians, hospitals, labs, clinics, and other health care providers.

- **Medical Conditions** – The diagnoses in the claims record are grouped and summarized to display the principal clinical conditions of the patient. The principal medical conditions are organized and presented according to their relative clinical significance. This method is used to avoid an exhaustive list of all diagnosis codes found in the claims records. Medical Conditions are based on Thomson Reuters Medical Episode Groups and Disease Staging Model.

- **Medications** – This section lists the class of any prescription drugs filled at retail pharmacies billed during the given time period. Prescriptions billed on non-pharmacy claims, such as hospital and physician claims, are not included. The number of times each prescription was filled and the last time it was filled is included.

- **Lab Results** – This section lists laboratory result values for diabetic and cholesterol screenings performed during the prior 12-month period based on adjudicated claims during that given period. Standard information displayed for each lab value includes the date of the lab test, lab test name, lab test value, reference range, the lab data source name and class.

- **Monitored Services** – This section lists any monitored services billed and adjudicated during the given time period, such as labs, radiological services, and procedures.

- **Inpatient Facility Admissions** – This section lists any admissions to an inpatient facility, such as hospitals, rehabilitation centers, and other similar facilities.

- **Emergency Room Visits** – This section lists the number of emergency room visits that took place and were adjudicated during the given time period. Currently, the CareProfile does not include the name of the facility.

- **Health Status Measure** – A clinically based model uses all the diagnosis codes in the patient's claims records to predict the risk of additional medical events over the next 12 months. Individual risk scores are presented on a scale of one to ten (1 represents the lowest decile of risk of future events and 10 represents the decile with the greatest probability of future significant events). The Health Status Measure (HSM) reflects the impact on resource use by an individual with either a clinically severe condition (e.g. metastatic carcinoma) or significant co-morbid conditions (e.g., coronary disease, diabetes mellitus, congestive heart failure, and renal failure). HSM may be used to identify and stratify the most complex and high-risk patients. HSM is based on the DxCG Relative Risk Scores.

- **Clinical Flags** – This section lists treatment opportunities based on the clinical intelligence rules applied to the data. If the system detects a test that should be ordered, per evidence-based medicine, but no claim for that test was found during the time period, a message to the clinical staff displays in this section. For example, if the patient has diabetes and no claims for an annual dilated eye exam or A1C test are found has been performed in the appropriate time frame, a treatment opportunity flag displays.

- **Health and Wellness** – This section on the ACP indicates any missing recommended preventive care opportunities, typically based on age and gender of member as identified by Clinical Intelligence Rules.
A CareProfile might be unavailable or might exclude some information in the following instances:

- The Primary Access Administrator (PAA) for your Availity account has not granted you access to the Availity CareProfile.
- The Eligibility and Benefits request was not returned successfully.
- The Eligibility and Benefits request was processed for any of the below groups:
  - "ILFEP00 when selecting anything other than BCBSIL"
  - Texas Health Insurance Pool (ZGR-Alpha)
  - ZGM-Alpha Prefix Group #s: 0TX103, 0TX100, 0TX203, 0TX103, 0TX124, 0TX103
  - ITW Corporate Retirement
  - Illinois Labor Fund Groups
- The patient is a twin for which the Eligibility and Benefits inquiry requires the First Name and Last Name to be entered.
- The patient pays out-of-pocket and no claim is filed for the service. In other words, BCBSIL has no record of the service.
- The claims were adjudicated by a payer or health plan other than BCBSIL that does not participate in the Availity CareProfile program (Out-of-State).
- The patient has restricted access to his or her claim information.
- The services were performed too far in the past. BCBSIL returns results from the past 27 months.
- The patient is new and does not have claims history with BCBSIL.
- The patient resides outside of the area where Availity CareProfile has been implemented.
- The service involves sensitive information, such as psychiatric treatment, substance abuse, genetic testing, or HIV/AIDS-related treatment. The CareProfile excludes such sensitive information.
- The patient is eligible for Medicare or has other primary health care coverage (coordination of benefits).
- Claim data has not completed the clinical intelligence rules application. Claims processed within 90 days may not be available to view on the CareProfile.

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