

Blue adVantage Insight Newsletter

May 2024

In this edition:

page article

- 2 Required D-SNP Training is Now Available
- 2 Advanced Beneficiary Notices
- 3 Blue Advantage PCP Wellness Coupons
- 4 Guidelines for Prescribing Incretin Mimetics
- 5 More Blue Advantage Webinars Coming Soon
- 5 Use of CPT® Category II Codes
- 6 Updated Blue Advantage FAQs
- 6 Find Blue Advantage Medical Policies



Louisiana

Blue adVantage (HMO) | Blue adVantage (PPO)

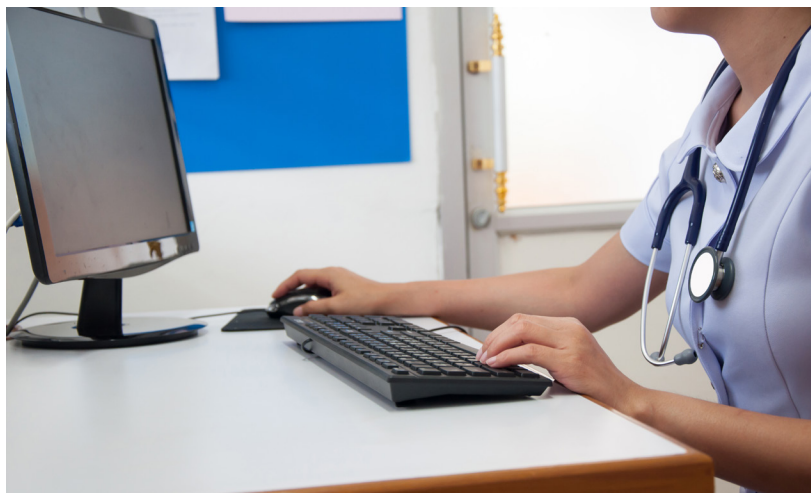
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Blue Cross and Blue Shield of Louisiana is an independent licensee of the Blue Cross Blue Shield Association.

Required D-SNP Training is Now Available

The Centers for Medicare and Medicaid Services (CMS) requires annual training on Dual Eligible Special Needs Plans (D-SNP) for providers.

A D-SNP Plan is a Medicare Advantage plan with special benefits and services designed to improve care and manage costs for dual-eligible enrollees. These enrollees include those entitled to Medicare and medical assistance from a state plan under Medicaid.



The dual-eligible population contains some of our most vulnerable members. D-SNP is designed to provide specialized early intervention programs that focus on education, coordination of care and increased communication with providers, members and caregivers to improve overall health outcomes. For Blue Advantage members this plan option is called Blue Advantage Dual Plus (HMO-POS D-SNP).

This training was sent by email to Blue Advantage providers with an email address on file.

If you have not yet completed the training, you may find it online. Go to www.bcbsla.com/providers, select "Go to BA Resources," then under "Webinars and Workshops," click "DSNP Annual Training."

This training will remain online throughout the year for you to reference at any time.

Advanced Beneficiary Notices

Advanced Beneficiary Notices (ABNs) cannot be used for Medicare Advantage plans like Blue Advantage HMO and PPO plans. To hold members financially liable for non-covered services not clearly excluded in the member's Evidence of Coverage (EOC), Blue Advantage providers must do the following:

- If the provider knows, or has a reason to know that a service may not be covered, request a prior authorization from Blue Advantage.
- If the coverage request is denied, an Integrated Denial Notice (IDN) will be issued to the member and requesting provider.
- If the member desires to receive the denied services after the IDN is issued, the provider may collect from the member for the specific services outlined in the IDN after services are rendered.

Blue Advantage PCP Wellness Coupons

Our Annual Wellness Coupons for Primary Care Providers (PCPs) are now available. This program encourages Blue Advantage members to receive their annual wellness checkups.

If a member comes in with their personalized coupon, PCPs should review the diagnoses listed and mark any additional codes that are applicable. Blue Advantage may ask PCPs to submit a corrected claim if diagnoses marked on the coupon are not billed on the claim.

PCPs receive a \$100 reimbursement for each completed coupon, in addition to their fee for services. Fax completed coupons to 1-844-843-9770.

If a member has already had a wellness visit for the year, they can schedule a second visit to use their coupon. That second visit is at no cost to the member when the PCP performs and reports CPT® code G0438 or G0439 for the wellness visit.

If a member loses their coupon or needs an extra copy, the provider may call 1-833-949-2788 to request another one.

Coupons are also available through the Blue Advantage Provider Portal, using the Member Lookup tab on the left side of the home screen. There, you may search for the member using their Member ID, name or date of birth. After selecting the member's profile, select "Download Wellness Coupon" and a PDF copy of the coupon will be generated. Please note that the member must be assigned to a provider associated with your group or this option will not be available.



2024 ANNUAL WELLNESS EXAM COUPON - DO NOT DISCARD

If you have any questions, please call 1-833-955-3816 (TTY 711), Monday - Friday from 8 a.m. to 5 p.m.



ATTENTION: Blue Advantage (HMO) | Blue Advantage (PPO) Member

Please take this coupon to your in-network Blue Advantage Primary Care Provider for an Annual Wellness exam AT NO CHARGE to you!

ATTENTION: HEALTHCARE PROVIDER & OFFICE MANAGER

Blue Advantage members have no deductibles, copays or coinsurance for this Annual Wellness exam. The following services (CPT codes) should be billed with the wellness ICD-10 Z00.00 or Z00.01 as primary, together with all other appropriate ICD-10 diagnosis codes including any of the diagnoses on the back of this page.

CODES TO BILL:

Annual Wellness Exam - G0439

AND THE FOLLOWING SCREENINGS:

85025 CBC
80053 CMP
80061 Lipid panel
81002 Urine Dip
93000 EKG if indicated (e.g., irregular heart rhythm)
82270 FOBT x 3 for patients 50-75
G0328 iFOBT x 1

For Diabetics, add the following:
83036 HgbA1C
Perform eGFR and uACR for Kidney Health
Schedule an annual eye exam for retinopathy screening

For Females, consider the following:
Mammogram and Pap Smear

Monitoring of chronic stable conditions, prescription refills and vaccinations may also be included in the examination.

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PROVIDER: PLEASE COMPLETE OTHER SIDE
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Guidelines for Prescribing Incretin Mimetics

Incretin mimetics, including GLP-1 and dual GIP/GLP-1 receptor agonists, are medications used for the treatment of Type II diabetes. They show additional benefits for obesity and weight loss management. Blue Advantage does not cover prescriptions of these drugs for obesity or weight loss. Coverage of a prescription requires prior authorization with a diagnosis of Type II diabetes.

Incretin Mimetics Covered by Blue Advantage

- Bydureon® BCise
- Byetta®
- Mounjaro®
- Ozempic®
- Rybelsus®
- Trulicity®

Common Issues & Solutions

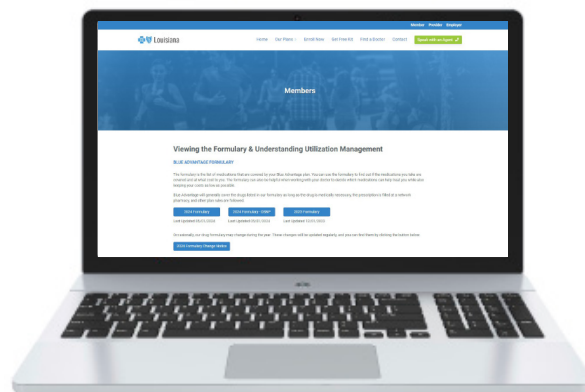
Pharmacies are currently facing supply issues with incretin mimetics, partly due to off-label prescribing. Patients with Type II diabetes are experiencing limited access to their medication and providers are having to prescribe another incretin mimetic. When a pharmacy has more than one prescription on file for a patient, they run the risk of filling both prescriptions. This can lead to increased side effects, unnecessary copays and higher healthcare costs for organizations.

Other reasons a patient may need to switch to another incretin mimetic or change medication strengths include cost, the need for improved glycemic control, adverse reactions, patient preference or adherence concerns.

When making a change to a patient's prescription there are ways providers can help minimize the risks of multiple prescriptions for different strengths or filling different incretin mimetics together.

1. Educate the patient on the reason for switching to a new medication and make sure they understand they will not be using both medications together.
2. When calling, faxing or electronically sending in a new prescription, be sure to add a note for the pharmacy to discontinue the previous prescription.
3. If prescribing a loading dose and maintenance dose at the same time, do not add refills to the loading dose prescription.

We will continue to review claims for compliant prescribing and billing. Improper prescribing and/or falsifying prior authorizations could impact your network status and/or have other legal implications. You may find the prior authorization criteria for these medications on the Blue Advantage website at <https://blueadvantage.bcbsla.com/medicare/formularyum>, under "2024 Prior Authorization Criteria."



More Blue Advantage Webinars Coming Soon

Blue Advantage will continue to host provider webinars throughout the year, with our PCP Annual Wellness Coupon & Incentive and New to Blue Advantage webinars coming later this summer.

Find registration links in the "Events" section of our Weekly Digests. Registration links are included approximately one month prior to each event. Weekly Digests are sent to the correspondence email address. If the correspondence information on your provider record needs updating, you may use our Provider Update Request Form to make updates. It is available at www.bcbsla.com/providers, click "Resources," then "Forms."

Upcoming Blue Advantage webinars dates:

- PCP Annual Wellness Coupon & Incentive – Wednesday, July 17
- New to Blue advantage webinar – Wednesday, August 14

Missed any of our webinars?

You can find past workshop and webinars in the Blue Advantage Provider Portal, under "Resources." You may also find them online at www.bcbsla.com/providers, click on "Go to BA Resources" at the bottom of the page, then click "Webinars and Workshops."

Use of CPT® Category II Codes

CPT II codes describe clinical components that may be typically included in evaluation and management (E&M) services or other clinical services and do not have a relative value associated with them. These codes may also describe results from clinical laboratory or radiology tests and other procedures.

The advantages of using these codes are:

- Lessening the administrative burden of chart review for many Healthcare Effectiveness Data and Information Set (HEDIS®) performance measures.
- Enabling organizations to monitor internal performance for key measures throughout the year, rather than once per year as measured by health plans and pay for performance.
- Identifying opportunities for improvement so interventions can be implemented to improve performance during the service year.

Note: These codes are not reimbursable and should reflect a \$0 charge. Always code to the highest level of specificity. If you have questions on coding, more information is available in the *Blue Advantage Provider Administrative Manual*, available online at www.bcbsla.com/providers, click "Blue Advantage Resources," then "Manuals."


Updated Blue Advantage FAQs

We recently updated the Blue Advantage FAQs for 2024 with information on topics including:

- Blue Advantage Provider Portal
- Authorizations
- Electronic Funds Transfer (EFT) and Electronic Remittance Advice (ERA)
- Claims Submission
- Pharmacy
- Care Management

The FAQs are also available in two locations:

- The Blue Advantage Provider Portal <https://bcbslaproviderportal.com> > Resources > Reference Materials.
- The Blue Cross Provider Page www.bcbsla.com/providers > Blue Advantage Resources > Manuals and Guides.


Blue adVantage (HMO) | Blue adVantage (PPO)

Blue Advantage Frequently Asked Questions (FAQs)

This is a list of Blue Advantage FAQs that can be used as a guide to access information about Blue Advantage (HMO), PPO and Dual Special Needs Plans (D-SNP) services. It includes information on Electronic Funds Transfers (EFT), claims submissions, submitting authorizations, pharmacy information and accessing the Blue Advantage Provider Portal.

Overview of Blue Advantage

- 1. What is Blue Advantage?**

Blue Advantage refers to Blue Cross and Blue Shield of Louisiana's Medicare Advantage products and provider networks exclusively available to Medicare Advantage-eligible customers. Blue Advantage follows the policies and procedures outlined by the Centers for Medicare & Medicaid Services (CMS).
- 2. What Blue Advantage products are offered to Medicare Advantage-eligible customers?**

Three member benefit options are available, which include Blue Advantage (HMO), Blue Advantage (PPO) and Blue Advantage Dual Plan (D-SNP HMO-PPO). With these benefit plans, Blue Advantage members have coverage for a wide array of services. Covered services include outpatient prescription drug coverage, hospitalization, home care, preventive care services and ambulance transportation.
- 3. What do the Blue Advantage member ID cards look like?**

Blue Advantage (PPO) ID cards include the prefix of PMV for PPO coverage.

Blue adVantage (PPO)	
Member ID	000000
Group ID	000000
Subscriber	000000
Member Name	000000
Member Address	000000
Member City	000000
Member State	000000
Member Zip	000000
Member Phone	000000
Member Email	000000
Member Date of Birth	000000
Member Gender	000000
Member Race	000000
Member Ethnicity	000000
Member Religion	000000
Member Marital Status	000000
Member Employment Status	000000
Member Primary Care Physician	000000
Member Specialist Physician	000000
Member Hospital	000000
Member Pharmacy	000000
Member Mail Address	000000
Member Mail City	000000
Member Mail State	000000
Member Mail Zip	000000
Member Mail Phone	000000
Member Mail Email	000000
Member Mail Date of Birth	000000
Member Mail Gender	000000
Member Mail Race	000000
Member Mail Ethnicity	000000
Member Mail Religion	000000
Member Mail Marital Status	000000
Member Mail Employment Status	000000
Member Mail Primary Care Physician	000000
Member Mail Specialist Physician	000000
Member Mail Hospital	000000
Member Mail Pharmacy	000000
Member Mail Mail Address	000000
Member Mail Mail City	000000
Member Mail Mail State	000000
Member Mail Mail Zip	000000
Member Mail Mail Phone	000000
Member Mail Mail Email	000000
Member Mail Mail Date of Birth	000000
Member Mail Mail Gender	000000
Member Mail Mail Race	000000
Member Mail Mail Ethnicity	000000
Member Mail Mail Religion	000000
Member Mail Mail Marital Status	000000
Member Mail Mail Employment Status	000000
Member Mail Mail Primary Care Physician	000000
Member Mail Mail Specialist Physician	000000
Member Mail Mail Hospital	000000
Member Mail Mail Pharmacy	000000

Find Blue Advantage Medical Policies

Medical policies for Blue Advantage members are now available on our Blue Advantage Resources page (<https://providers.bcbsla.com/ba-resources>), click "New/Revised Medicare Advantage Medical Policies."



Who Do I Contact if I Have Questions?

For claims status, member eligibility, benefit verification and care management inquiries that cannot be resolved through the Blue Advantage Provider Portal, contact Blue Advantage Customer Service at 1-866-508-7145.

For questions specific to the Blue Advantage quality program, contact your Provider Relations representative or send an email to provider.relations@bcbsla.com.



Looking For Blue Advantage Resources?

Blue Advantage consistently reviews and updates its provider resource materials. This ensures that you have access to current information. We have our Blue Advantage Resources page, which can be accessed through the Blue Advantage Provider Portal, under "Blue Advantage Resources."

You may also access Blue Advantage Resources through the Blue Cross Provider page, www.bcbsla.com/providers, by clicking "Go to BA Resources" at the bottom of the page.

The Blue Advantage Resources page contains:

- The *Blue Advantage Provider Administrative Manual* and the *Blue Advantage Provider Portal User Guide*.
- Past issues of this newsletter.
- Webinar and workshop presentations, including the 2023 “BA Provider Workshop” and the 2024 “Blue Advantage PCP Incentive Coupon” webinar presentations.

Looking For Blue Advantage Providers?

If one of your Blue Advantage patients needs care from another provider, the Blue Advantage Provider Portal has a Provider Directory option. Additionally, <https://blueadvantage.bcbsla.com/provider/providersearch> allows you to search for Blue Advantage network providers by category and specialty, with filters by city, parish/county and ZIP code.

Do We Have Your Current Contact Information?

Use the Provider Update Request Form to submit updates or corrections to your practice information. The form is available online at www.bcbsla.com/providers >Resources >Forms.

View this newsletter online at www.bcbsla.com/ilinkblue, then click on "Blue Advantage" under Other Sites.

Blue Advantage Insight

Blue Advantage Insight is a publication to keep our network providers informed on the latest Blue Advantage news. We encourage you to share this newsletter with your staff.

The content in this newsletter is for informational purposes only. Diagnosis, treatment recommendations and the provision of medical care services for Blue Advantage members are the responsibilities of healthcare professionals and facility providers.

What's on the Provider Portal

www.bcbsla.com/ilinkblue > Blue adVantage

- Member Eligibility
- Claims Inquiry
- Authorization Inquiry
- Forms
- Help Documents
- Helpful Links
- Updated Manual
- Updated Quick Reference Guide

Blue Advantage Resources

Visit the Blue Advantage Resources page to view reference materials, forms, past webinar and workshop slides, plus copies of this newsletter. Go to www.bcbsla.com/providers, then click "Go To BA Resources" at the bottom of the page.

Important Contact Information

Authorizations (including Case and Medical Management)

1-866-508-7145, choose option 3, then option 3

Behavioral Health

1-866-508-7145, choose option 3, then option 3

Blue Advantage Customer Service

1-866-508-7145

customerservice@blueadvantage.bcbsla.com

Blue Advantage Provider Portal

1-866-508-7145, choose option 3, then option 2

Provider Credentialing & Data Management

1-800-716-2299, option 2 (provider record information) PCDMstatus@bcbsla.com

Pharmacy

1-800-935-6103/TTY:711

For additional contact information on Blue Advantage services, please refer to our Provider Quick Reference Guide found on the Blue Advantage Provider Portal.

**Please share this newsletter with your office staff.
This and past newsletters are available on the Blue Advantage Provider Portal
(www.bcbsla.com/ilinkblue > Blue Advantage).**