

provider networknews

2020

3RD QUARTER

Providing health guidance and affordable access to quality care

It's That Time Again: Flu Season is Here

September 22 marked the official start of fall, which is also the time of year when flu cases begin to appear. Given that this year the annual flu season will overlap with the ongoing novel coronavirus (COVID-19) pandemic, Blue Cross and Blue Shield of Louisiana urges everyone to take steps to prevent the spread of illnesses.

Although there is currently no available vaccine for COVID-19, the same preventive steps people have taken over the past several months can effectively lower the risk of spreading the novel coronavirus, influenza virus and other respiratory illnesses.

The U.S. Centers for Disease Control & Prevention (CDC) recommends everyone six months of age and older get a flu shot each year. It is especially important for young children, pregnant women, adults 60+ years old and anyone who has chronic medical conditions like diabetes, heart disease or asthma, as these groups are at a higher risk for severe complications from the flu.

While getting a flu shot is an important part of preventive wellness every year, it will be especially important this year, given the added threat of COVID-19 overlapping with flu season, which typically begins in October and lasts until April or May, with cases peaking in late winter.

As a reminder, Blue Cross covers flu vaccines at 100% for fully-insured groups. That means no copayment, no coinsurance and no deductible to fully-insured members who receive their shots from a network provider or participating retail pharmacy.



The best way to prevent the flu is to get a flu vaccine each year.

Recent studies from the CDC show that a flu shot can reduce a person's chance of getting the flu by up to 60%.

With COVID-19 still spreading, flu season could be especially complicated for anyone whose immune system is weakened. Getting a flu shot is just one way to help your patients, their families and friends stay healthy, which also helps lessen the burden on healthcare resources.

ONLINE RESOURCES

Inpatient, Home Health Authorization Requests Moving to Online Only



Blue Cross is streamlining its processes for requesting prior authorization for inpatient acute care facility services and home health services.

Effective October 1, 2020, we are requiring all prior authorization requests from acute care facilities or home health providers to be submitted exclusively through our online BCBSLA Authorizations Tool. Beginning October 1, authorization requests for home health services or inpatient acute hospitalization stays will no longer be taken via phone or fax. This includes initial new service requests and extensions, as well as (new) inpatient stays and continued stays.

Providers must use the BCBSLA Authorization Tool to start the process for all new requests; phone calls or faxes received after this date will be directed to the online tool. This change will allow for providers to request authorizations for services 24 hours a day, seven days a week, in real time. The authorization tool is located under the "Authorizations" tab in iLinkBlue, (www.BCBSLA.com/ilinkblue), then click on the "BCBSLA Authorizations" link.

The current fax number (1-800-267-6547), used for facilities to fax authorization requests and clinical information for acute stays, will be turned off on October 1, 2020. We will continue to send inpatient acute census reports to facilities and providers will be required to enter discharge dates through the BCBSLA Authorization Tool.

Phone calls and faxes from providers for home health authorizations received after this date will be directed to the authorization tool. Providers will need to supply the necessary clinical information in one of the three ways outlined below:

- Providers may complete a criteria review via InterQual (IQ). Most instances where IQ is completed, and criteria are met will receive online approval. Completing an IQ review is not required. For home health providers, some self-funded (ASO) members will not get an automatic approval due to benefit limits.
- Providers may upload clinical information to the authorization request through the BCBSLA Authorization Tool.
- Providers may document the clinical information in the notes section of the authorization request in the BCBSLA Authorization Tool. This option requires the provider to generate an activity within the request. If an activity is not generated, the clinical information will not be available for Blue Cross to review.

For retrospective authorization requests, upload medical records and the Authorization Form in iLinkBlue, using the new document upload feature. Click on the "Document Upload" link on the home page, then select "Medical Records for Retrospective or Post Claim Review" from the department drop down. The Authorization Form is available at www.BCBSLA.com/providers, click "Resources," then "Forms."

Other Resources:

For more information on how to use our BCBSLA Authorizations Tool, the BCBSLA Authorizations Applications Facility User Guide is available on iLinkBlue under the "Resources" tab, then click "Manuals."

We also have an iLinkBlue User Guide available at www.BCBSLA.com/providers, click "Resources," then "Manuals."

If you do not have access to iLinkBlue, please reach out to your organization's administrative representative. If you do not have an administrative representative, please visit our Provider Page and click "Designate Your Rep."

ONLINE RESOURCES

Provider Directory Update

Keeping your information up to date with us is extremely important to help our members find you.

We publish provider demographic information in our online provider directory. The directory is available on our website at www.BCBSLA.com.

It is the contractual responsibility of all participating providers to contact Provider Credentialing & Data Management to update your information as soon as it changes. This includes:

- Location Addresses (i.e., Street Address)
- Phone, Fax Numbers & Email Addresses
- Ability to Accept New Patients

Or, any changes that would affect a member's ability to see this provider such as:

- No longer practicing at location(s)
- Practitioner terminations

To improve the accuracy of our online provider directory, we have begun requiring each provider to report the number of hours they work per week at each practice location. We will only add providers to the directory if they can schedule appointments to see patients at least 16 hours a week at each location.

If you need to update or correct your practice information, please use the Provider Update Request Form available online at www.BCBSLA.com/providers > Resources > Forms > DocuSign.

BILLING & CODING

Multiple Procedure Reduction for Colonoscopy

Blue Cross recently completed a review of our reimbursement methodology for colonoscopy procedures. As a result of this review, we are enhancing the multiple procedure reduction(s) and changing some bundling edits specific to colonoscopy procedures.

Effective for dates of service on and after October 1, 2020, Blue Cross will apply a multiple procedure reduction to colonoscopy codes assigned to the Centers for Medicare & Medicaid Services (CMS) endoscopy family with base CPT® code 45378.

When multiple colonoscopy procedures assigned to CMS endoscopy family base code 45378 are performed on the same day, the multiple procedure reduction will apply as follows:

- The highest valued procedure from the family will be the primary endoscopy code reimbursed at 100% of the allowable charge.
- Any additional codes in the family will be reimbursed at 10% of the allowable charge.

If these colonoscopy procedures are billed on the same day as other procedures that are subject to a multiple procedure reduction, the primary endoscopy code may be subject to multiple procedure reduction.

As outlined in Section 5.25 Multiple Procedures of the *Professional Provider Office Manual* (available online at www.BCBSLA.com/providers > Resources > Manuals), the highest valued procedure will be the primary procedure reimbursed at 100% of the allowable charge while secondary procedures will be reimbursed up to 50% of the allowable charge. Endoscopy procedures reimbursed at 10% of the allowable charge for the colonoscopy multiple procedure reduction will not be subject to additional multiple procedure reductions.

Blue Cross has updated Section 5.39 of the *Professional Provider Office Manual* to add these new reimbursement and billing guidelines for colonoscopy multiple procedure reductions.

Bundling Edit Changes

In conjunction with this change, Blue Cross will also allow Modifier 59 to override certain endoscopy bundling edits that previously denied. Beginning October 1, 2020, the following CPT code combinations will no longer bundle when billed with Modifier 59.

- 45380 to 45384
- 45382 to 45385
- 45380 to 45385
- 45384 to 45385

BILLING & CODING

AIM Programs May Require Increased Documentation

Blue Cross requires providers to submit various pre-service requests to AIM Specialty Health[®] for diagnostic radiology and cardiology services. As part of our ongoing quality improvement efforts in 2020, AIM has instituted a “chart check” program, and may request documentation to support the clinical appropriateness of certain authorization requests.

Upon submitting a request for authorization online in AIM’s **ProviderPortal_{SM}**, certain pathways of clinical scenarios will have chart check applied. In those instances, providers will be prompted to upload supporting documentation (e.g., medical records) with the submission of their request.

The AIM **ProviderPortal_{SM}** is available in iLinkBlue, www.BCBSLA.com/ilinkblue, under the “Authorizations” tab through the link titled “AIM Specialty Health Authorizations.”



When prompted, providers will have an option to submit documentation by clicking the “Attach File” button in the **ProviderPortal_{SM}** or to call AIM toll free at 1-800-554-0580 to discuss their request with an AIM physician reviewer.

The clinical pathways for which this program applies include the treatment modalities listed here in the specific scenarios:

MODALITY	CLINICAL SCENARIO
MRI Head	Headache
CT Sinus	Sinusitis/Rhinosinusitis
MRI Cervical Spine	Signs/symptoms & abnormal imaging
MRI Lumbar Spine	Signs/symptoms & abnormal imaging
CT abdomen/pelvis	Diverticulitis
CT abdomen/pelvis	Urinary tract calculus
PCI (percutaneous coronary intervention)	All scenarios
DCA (diagnostic coronary angiography)	All scenarios

If the appropriate documentation is not supplied, or if medical necessity is not supported, the request may be denied as not medically necessary.

AIM is an independent company that serves as an authorization manager for Blue Cross and Blue Shield of Louisiana and HMO Louisiana, Inc.

Pass-through Billing Not Allowed

Blue Cross and Blue Shield of Louisiana and HMO Louisiana, Inc. do not permit pass-through billing for any provider type, including contracted labs. Network providers and hospitals are not allowed to bill pass-through services. By billing in this manner, the provider and/or hospital is billing for services they did not render.

Pass-through billing occurs when the ordering physician, professional provider, facility or ancillary provider requests and bills for a service that has not been performed by the ordering physician, professional provider, facility or ancillary provider. You may only bill for services that you or your staff perform.

Over the past several years, the U.S. Department of Justice has investigated instances of pass-through billing and related kickbacks and has announced numerous indictments and criminal convictions.

Blue Cross takes these matters very seriously and continually monitors, detects and investigates these specific issues. We do not allow business arrangements that involve the purchasing of other entities’ receivables, as this type of arrangement results in overpayments and misrepresentations in the performing providers’ accounting books/records.

Pass-through billing is a violation of your Blue Cross contract and may be a violation of federal law.

BILLING & CODING

New Code Edit for Knee Arthroscopy

Blue Cross will be implementing the following CPT code edits for the bundling of code 29879.

This code, which covers arthroscopy, knee, surgical; abrasion arthroplasty (including chondroplasty where necessary) or multiple drilling or microfracture **will bundle to** the following:

- **29880** for arthroscopy, knee, surgical; with meniscectomy (medial AND lateral, including any meniscal shaving) including debridement/shaving of articular cartilage (chondroplasty), same or separate compartment(s), when performed.
- **29881**, which covers arthroscopy, knee, surgical; with meniscectomy (medial OR lateral, including any meniscal shaving) including debridement/shaving of articular cartilage (chondroplasty), same or separate compartment(s), when performed.
- **29882** (Arthroscopy, knee, surgical); with meniscus repair (medial OR lateral); and **29883** (Arthroscopy, knee, surgical; with meniscus repair (medial AND lateral)).



Code 29879 is included in the work of the more extensive codes 29880-29883. The work of code 29879 (chondroplasty/microfracture) should only be reported separately when the work is performed in a different compartment than the other more extensive procedures.

This impacts claims processed on or after September 19, 2020.

Coding Change for Spinal Fusion



When performing anterior cervical and lumbar spinal fusions, surgeons frequently must both span the fusion with some sort of instrumentation, such as a plate and screw, and further stabilize the device with a biomechanical device, such as a cage or mesh.

In some cases, one single device is used that accomplishes both objectives. With these devices, the plate is integrated into the biomechanical device and the only instrumentation that is performed is related to anchoring of this single device. In these cases, only CPT code 22853 or 22854 can be reported. However, it is also typical to use separate devices.

Therefore, when separate and independent devices are used—meaning that, in addition to the mesh or cage, separate instrumentation is performed using a standalone/additional stabilizing device, such as a plate with screws—then the additional instrumentation beyond that used for the biomechanical device can be reported using CPT codes 22845-22847.

Always Review DME and Prescription Orders

Blue Cross reminds you to always be aware before signing off on any pre-populated, faxed prescriptions and orders for durable medical equipment (DME).

Be sure to thoroughly review and ensure that there is medical necessity for the prescription/device.

Over the past year, the Blue Cross and Blue Shield of Louisiana Financial Investigations Department has noted an increase in incidents where physicians are signing-off without thoroughly reviewing these orders.

Please be sure to alert your medical staff to this growing problem, avoid signing off on orders that you did not initiate and to report receipt of these orders to the Blue Cross Fraud Hotline at 1-800-392-9249.

MEDICAL MANAGEMENT

Blue Cross Implements \$0 Drug Copay Program



A Blue Cross program to improve medication adherence by making select drugs available at \$0 for members with chronic conditions led to significant declines in total healthcare spending, according to Blue Cross research recently published in the American Journal of Managed Care.

Blue Cross designed its \$0 Drug Copay program to focus on encouraging and supporting members with certain chronic diseases, including depression, in sticking to their prescribed medications. Because cost is a common reason people do not take medication as directed, the program removed out-of-pocket costs by providing members a widely used set of medications to treat their conditions for a \$0 copay.

“Our \$0 Drug Copay program achieved something unusual in healthcare – it enhanced patient access to medications and reduced total healthcare spending significantly after members enrolled in this program,” said Somesh Nigam, chief analytics and data officer at Blue Cross and Blue Shield of Louisiana. “The decrease was primarily in medical spending rather than pharmacy spending.”

Not taking needed medicines for chronic health problems can be dangerous and cause lasting health damage. It also is a significant factor contributing to the high clinical and economic costs of chronic disease, the Blue Cross researchers wrote in the recent paper “Value-Based Insurance Design in Louisiana: Blue Cross and Blue Shield’s Zero Dollar Co-pay Program.”

Patients enrolled in the \$0 Drug Copay program, which began in 2014, were associated with an 18% decrease in total spending. (Previous studies have shown that eliminating pharmacy copays led to patients being more likely to take medication as directed, but no change in total spending.)

Drugs in the \$0 Drug Copay Program are regularly recommended to treat asthma, chronic obstructive pulmonary disease (COPD), coronary heart disease, diabetes, heart failure and other common chronic conditions. Blue Cross identified a set of high-volume, low-cost medications for each relevant drug class and reduced the copay to \$0.

As Blue Cross has learned more about the program benefits, it has expanded the program several times.

The \$0 Drug Copay Program is now available for most members whose health plans have copays for prescription drugs and who get their pharmacy benefits through Blue Cross or HMO Louisiana. Members do not have to meet their deductibles before getting drugs covered in the program for \$0.

The program is not available for coinsurance-only pharmacy benefits. Members may go to www.BCBSLA.com/covereddrugs for a list of drugs in the program.

To find out if they have an eligible plan, members may call the Customer Service number on their ID cards.

MEDICAL MANAGEMENT

Preparing for 2021 HEDIS Medical Record Requests

Blue Cross would like to thank all our providers who participated in our chart collection efforts for Healthcare Effectiveness Data and Information Set (HEDIS), which measured performance in 2019. This season was particularly challenging as COVID-19 hit in the middle of our chart collection efforts. The flexibility you and your staff showed in handling this project was greatly appreciated. The Blue Cross HEDIS Team has begun planning for HEDIS Measurement Year 2020, which will measure performance in 2020.

The National Committee for Quality Assurance (NCQA) is in the process of finalizing changes to HEDIS measures, particularly in the field of telehealth. The changes will be presented this fall, and we will update you in this newsletter when that becomes available. As a reminder to you and your office staff:

Blue Cross will participate in the annual HEDIS medical review project in 2021. HEDIS is an annual performance measurement created by NCQA to help establish accountability and improve quality of healthcare.

Retrieving and reviewing medical record documentation is a key component of the HEDIS process. You may receive medical record requests from Blue Cross for chart audits.

It would be helpful if your office manager would communicate to us your preferred method of chart collection at the email listed below. Returning all requested medical records ensures that our results are an accurate reflection of care provided by you.

As a reminder, your provider contract allows for the release of medical information to Blue Cross at no cost. We request a seven-day turn around on all requests.

We look forward to working with you and demonstrating your quality of care in the HEDIS rates. We appreciate your cooperation and the time and effort you and your staff provide in support of this project.

If you have any questions, please contact the HEDIS Team at HEDISTeam@bcbsla.com.

STRONGER THAN

Screenings Save Lives: October is Breast Cancer Awareness Month

October is Breast Cancer Awareness Month. Blue Cross joins other healthcare organizations in reminding Louisianians how important it is to know your personal health risks and ask your doctor about screening.

"Breast cancer is the most common cancer in American women, but men can also develop breast cancer," said Blue Cross and Blue Shield of Louisiana Medical Director Dr. Emily Vincent. "The important thing is to catch it early, when treatment has the best chance of success."

Vincent advises starting with breast self-awareness.

"You know your body, and if you see or feel anything unusual, ask your doctor about it. And, talk to your doctor about your health and family history, to get a personalized recommendation on when you should have mammograms," Vincent said.

Fortunately, breast cancer screening is very effective at catching the disease in its earliest stages. Most women begin having mammograms around age 40, and men may need this screening. Doctors recommend mammograms for their patients based on their individual health history and risk factors. Talk with your primary care provider or OB-GYN about what is the best screening process for you.

YOU ARE **STRONGER** THAN



CANCER

MEDICAL POLICY UPDATE

We regularly revise and develop medical policies in response to rapidly changing medical technology. Benefit determinations are made based on the medical policy in effect at the time of the provision of services. Please view the following updated and new medical policies, all of which can be found on iLinkBlue at www.BCBSLA.com/ilinkblue, under the "Authorizations" menu option.

Updated Medical Policies

Policy No. Policy Name

Effective July 13, 2020

- 00061 Allogeneic Hematopoietic Cell Transplantation for Myelodysplastic Syndromes and Myeloproliferative Neoplasms
- 00213 Fentanyl Oral Transmucosal and Nasal Opioid Analgesics
- 00255 Metformin and Metformin Containing Products
- 00337 Migraine Medications (Oral, Injectable, Transdermal and Nasal)
- 00353 Non-Steroidal Anti-Inflammatory Drugs (NSAIDs)
- 00360 Selective Serotonin Reuptake Inhibitors (SSRIs) and Selective Norepinephrine Reuptake Inhibitors (SNRIs)
- 00436 apremilast (Otezla®)
- 00488 Identification of Microorganisms Using Nucleic Acid Probes
- 00518 Select Muscle Relaxants
- 00526 Select Inhaled Respiratory Agents
- 00527 Topical Antifungals
- 00533 Select Naloxone Auto-Injectors
- 00566 carbinoxamine 6 mg tablets (Ryvent™, generics)
- 00659 Orilissa™ (elagolix)
- 00672 Myocardial Strain Imaging

Effective August 10, 2020

- 00008 Automatic Implantable Cardioverter Defibrillators (AICD)
- 00175 Radiofrequency Ablation of Miscellaneous Solid Tumors Excluding Liver Tumors
- 00200 certolizumab pegol (Cimzia®)
- 00214 abatacept (Orencia®)
- 00223 golimumab (Simponi Aria®, Simponi®)
- 00319 Genetic Testing of CADASIL Syndrome
- 00405 cysteamine Delayed Release Capsules, Oral Granules (Procybsi®)
- 00511 reslizumab (Cinqair®)

Effective August 10, 2020 (cont.)

- 00513 ixekizumab (Taltz®)
- 00530 pyrimethamine (Daraprim®, generic)
- 00698 Select Novel Drug Formulations

Effective August 16, 2020

- 00199 Facet Radiofrequency Denervation
- 00260 Spinal Cord and Nerve Root Stimulators

Effective September 14, 2020

- 00350 Allergy Test of Unknown Efficacy
- 00359 Sedative Hypnotics
- 00385 Sodium-Glucose Co-Transporter-2 (SGLT-2) Inhibitors and Combination Products
- 00562 Molecular Testing in the Management of Pulmonary Nodules
- 00652 Netarsudil Ophthalmic Products (Rhopressa®, Rocklatan®)
- 00682 Ambulatory Event Monitors and Mobile Cardiac Outpatient Telemetry

Effective September 26, 2020

- 00084 Magnetic Resonance Imaging for Detection and Diagnosis of Breast Cancer
- 00153 Contrast-Enhanced Coronary Computed Tomography Angiography (CCTA) for Coronary Artery Evaluation

New Medical Policies

Policy No. Policy Name

Effective July 13, 2020

- 00707 Select Antipsychotic Drugs

Effective August 10, 2020

- 00708 teprotumumab-trbw (Tepezza™)

Effective September 14, 2020

- 00712 infliximab-axxq (Avsola™)

How do I Update My Email Address on File?

The Provider Update Request Form is available via DocuSign® online at www.BCBSLA.com/providers, click "Resources," then "Forms."

To help providers, we created a DocuSign® guide that is available online at www.BCBSLA.com/providers, then click "Join Our Networks."

DocuSign® is an independent company that Blue Cross and Blue Shield of Louisiana uses to enable providers to sign and submit provider credentialing and data management forms electronically.

Louisiana Provider Update Request Form

Consider this form to give Blue Cross and Blue Shield of Louisiana the most current information on your practice. Updates may include changes in address and/or lines of operation. Check the box and complete on the sections with needed changes. Please type or print legibly in black ink.

PERSONAL INFORMATION

First Name: _____ Last Name: _____
 Title: _____ Provider Number (provide date): _____
 Clinic Name: _____ Clinic Location (provide date): _____
 Language spoken: Adding language codes (please specify) _____
 Number of Persons Completing this: _____
 Contact Phone No. Home: _____ Contact Email Address: _____
 Current Specialty: _____
 Changing Specialty? Yes, please specify New Specialty: _____ No, you are staying in your specialty (SIC) Yes No

BILLING ADDRESS CHANGES (submit for payment regions, reimbursement checks, etc.)

Are you changing your billing address? Yes No
 Old Street and ZIP Code: _____ Phone Number: _____
 New Billing Address: _____
 Old Street and ZIP Code: _____ Phone Number: _____
 Total Address: _____ (Effect Date of address change)

MEDICAL RECORDS ADDRESS CHANGE (for medical records request)

Are you changing your medical records address? Yes No
 Old Street and ZIP Code: _____ Phone Number: _____
 New Medical Records Address: _____
 Old Street and ZIP Code: _____ Phone Number: _____
 Total Address: _____ (Effect Date of address change)

Page 1 of 2

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STRONGER THAN

Blue Cross Care Management Helping Patients Maintain Healthy Habits

Stronger Than the Struggle

As the COVID-19 crisis continues and people are called upon to practice social distancing and limit certain activities, healthy habits can be a struggle. As a part of Blue Cross' Stronger Than messages to raise awareness of our Care Management programs and services, we are asking providers to help carry the message to our members—your patients—that they have the strength to maintain those healthy habits.

Join us and invite your patients to tune in to our Facebook Live broadcasts and video recordings from the Blue Cross and Blue Shield of Louisiana Facebook page. In these events, our staff clinicians and others will share tips and resources to help your patients be STRONGER THAN EVER. Our team of nurses, dietitians, pharmacists and social workers will host these virtual sessions to educate, support and encourage members on their journey to optimal health.

Blue Cross will host livestreams on the Facebook page and post the videos of each event to our Facebook page and our YouTube channel. Encourage your patients to watch live or visit us at www.facebook.com/bluecrossla or www.youtube.com/bcbsla to view the educational videos at their convenience. Your patients can post their questions during or after each event on the Facebook page, and Blue Cross clinicians will respond as time allows.

One Monday a month, Avis Brown, LCSW, will host "Motivated Mindset: Stronger Than Stress." Additionally, two Wednesdays of each month will feature "Romaine Calm and Carrot On," with Katherine Langlois and Laura Vidrine, RD, and "Stronger Together: Our Care Team" featuring Blue Cross nurses, pharmacists or medical directors.

These livestreams will take place from 12-12:30 p.m. on the Blue Cross and Blue Shield of Louisiana Facebook page.

Other scheduled programming includes the following:

- October 7: Stronger Together: Our Care Team, featuring Dr. Larry Simon and Sandra Williams, RN
- October 14: Healthy Holiday Eating Habits: Halloween edition
- October 28: What Can Your Health Coach Do for You? Our Care Team in Action
- November 2: Motivated Mindset: Stronger Than Stress with Avis Brown, LCSW
- November 11: Healthy Holiday Eating Habits: Grateful edition
- November 18: What Can Your Health Coach Do for You? Our Care Team in Action
- December 7: Motivated Mindset: Stronger Than Stress with Avis Brown, LCSW
- December 9: Healthy Holiday Eating Habits: Holiday edition
- December 16: What Can Your Health Coach Do for You? Our Care Team in Action

Please encourage your patients to stay tuned to the Blue Cross and Blue Shield of Louisiana Facebook page to see updates about each month's Facebook Live events. Events may need to be rescheduled because of unforeseen circumstances, and the latest details will be available on the Facebook page.

STAY CONNECTED



Visit BCBSLA's Provider Page:
www.BCBSLA.com/providers



Connect with us
on Facebook:
[bluecrossla](https://www.facebook.com/bluecrossla)



Follow us on Twitter:
[@BCBSLA](https://twitter.com/BCBSLA)



Follow us on Instagram:
[@bcbsla](https://www.instagram.com/bcbsla)



Watch us on YouTube:
[bluecrossla](https://www.youtube.com/bluecrossla)

RESOURCES

COVID-19 Provider Resources Page

Since March 2020, we have been making provisions to help our providers as they work tirelessly to treat patients for the novel coronavirus (SARS-CoV-2) and the illness it produces (COVID-19).

Visit www.BCBSLA.com/providers, then click the link at the top of the page to get more information on the provisions we have put in place for:

- Authorizations
- Telehealth
- Billing & Coding Guidelines
- Provider Credentialing & Data Management
- Quality Blue

Check this page often, as we are constantly updating it with new information. Blue Cross continually monitors new developments so we can best meet the needs of our members and providers.

Always Verify Member Benefits

It is important to always verify member benefits prior to rendering services, to ensure they are covered and the appropriate member cost share to collect.

This can be done easily using iLinkBlue (www.BCBSLA.com/ilinkblue), our online self-service provider tool.

When referring members for services, please send them to network providers as they receive the highest level of benefits. If an authorization is required, you may request it electronically through iLinkBlue. For the full list of services that require authorization, view our online speed guides at www.BCBSLA.com/providers, then click on "Resources" and look under "Speed Guides."

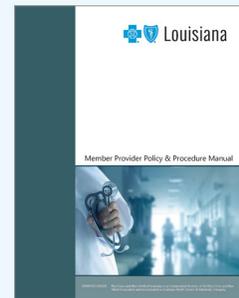
Thank you for working with us to provide our members with access to the best possible services and benefits.

Updated Provider Manuals

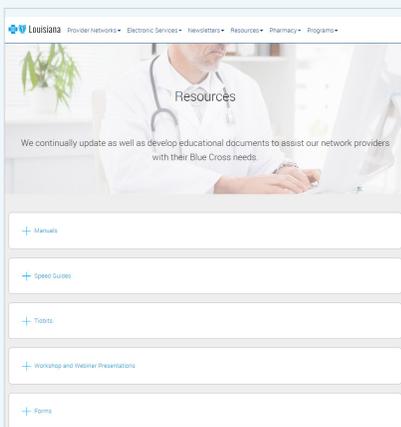
Our manuals are an extension of your provider agreement(s) and include the information you need as a participant in our networks. We recently updated our provider manuals for 2020 with new information:

- Intra-operative Monitoring Services
- Colonoscopy Multiple Procedure Reduction

The *Professional Provider Office Manual*, *Dental Network Office Manual* and *The BlueCard® Program Provider Manual* are all available at www.BCBSLA.com/providers, then click on "Resources." The *Member Provider Policies & Procedure Manual* (facility manual) is available through iLinkBlue only. Go to www.BCBSLA.com/ilinkblue and choose the "Resources" menu option.



Updated Provider Resources Page



Our Provider Resources page (www.BCBSLA.com/providers) has several updates, including:

- Updated forms for filing Provider Disputes
- PDFs of webinar presentations, including our Behavioral Health, Professional Provider, PCDM and BlueCard presentations
- New and updated medical policies

Additionally, the Provider Resources page includes our provider tidbits, network speed guides, updated medical policies and our provider manuals.

UPCOMING EVENTS

BlueCard® Webinar

October 21

We are hosting a webinar for providers that work under our BlueCard® Program. We recommend that clinical and business office staff members, as well as those who work with claims and reimbursement, attend one of these webinars. In this webinar you will learn important information about how the BlueCard Program works, authorizations and billing guidelines, filing claims, reimbursements and other resources.

Provider Credentialing & Data Management Webinar

November 4

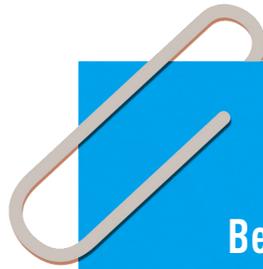
We are hosting a one-hour webinar designed to educate network professional and facility providers about our credentialing webpage, provider enrollment requirements and credentialing program.

New to Blue Cross Webinars

November 18

Welcome to the Blue Cross Network. We are holding webinars for professional providers and facilities that are new to our provider networks or have new personnel. These webinars are designed to offer key information about our credentialing requirements, networks, claims filing options, medical documentation, iLinkBlue and other Blue Cross resources.

Times not listed here will be announced in upcoming newsletters or invitations that will come via email, approximately a month before each event.



Be Sure to Register!

Preregistration is required to attend the webinars listed on the left. To request a registration link, simply send an email to Provider.Relations@bcbsla.com. Include the webinar name in the subject line, and in your email include the date and time you plan to attend. Include your name and a contact number.



Get Our Newsletter Electronically

To be added to our newsletter mailing list, send us an email to Provider.Communications@bcbsla.com. Put "Newsletter" in the subject line and include the following information in your email:

- Name
- Organization Name and/or Provider Name
- Contact Phone Number



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What's New on the Web

www.BCBSLA.com/providers

- **Updated** New and revised forms and medical policies. You may view these under Resources.

Important Contact Information

Authorizations

See member's ID card

BlueCard® Eligibility

1-800-676-BLUE
(1-800-676-2583)

FEP

1-800-272-3029

Fraud & Abuse

1-800-392-9249
fraud@bcbsla.com

iLinkBlue & EDI

1-800-216-BLUE
(1-800-216-2583)
EDIServices@bcbsla.com

PCDM

1-800-716-2299, Opt. 2 Provider
Credentialing, Opt. 3 Data
Management

Customer Care Center

1-800-922-8866

Claims Filing Address

P.O. Box 98029
Baton Rouge, LA 70809

Updating Your 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.

Network News

Network News is a quarterly newsletter for Blue Cross and Blue Shield of Louisiana network providers. 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 Cross members are the responsibilities of healthcare professionals and facility providers.

View this newsletter online at www.BCBSLA.com/providers > Newsletters.

The content of this newsletter may not be applicable for Blue Advantage (HMO) and Blue Advantage (PPO), our Medicare Advantage products and provider networks. For more on Blue Advantage, go to <https://providers.bcbsla.com/ba-resources>.

Get News Electronically

Your correspondence email address allows us to electronically keep you abreast of the latest Blue Cross news and some communications that are sent via email only. Email Provider.Communications@bcbsla.com and please include a contact name, phone number and your provider number.

Please share this newsletter with your insurance and billing staff!