

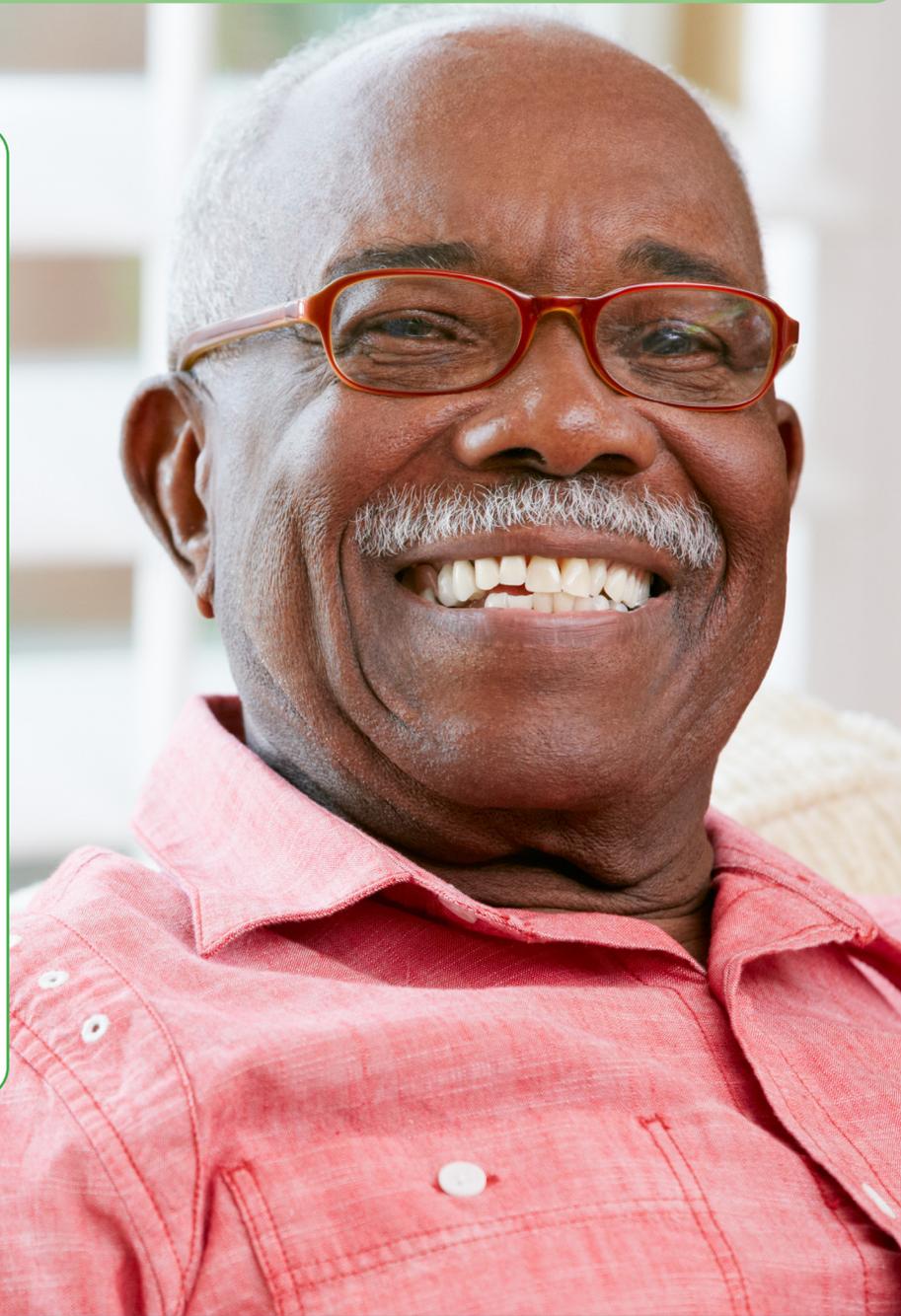
Blue Advantage Insight Newsletter

December 2020

In this edition:

page article

- 2 Blue Advantage Partners with Vantage Health Plan
- 2 2021 Member ID Cards have a NEW Look
- 3 Blue Advantage has a NEW Provider Portal for 2021
- 3 Not Registered for the Portal
- 4 2021 Billing Changes
- 4 Policy Change for RAP Claims for Medicare Advantage Members of Other Blue Plans
- 4 2021 Claims Processing
- 6 2021 Blue Advantage EFT and ERA Processes
- 7 Blue Advantage 2020 Runout Processes
- 8 Authorizations
- 9 Do We Have Your Current Contact Information?
- 9 Provider Pay Disputes



Louisiana

Blue Advantage (HMO) | Blue Advantage (PPO)

18NW2756 R12/20
20-191_Y0132_C

Blue Cross and Blue Shield of Louisiana HMO offers Blue Advantage (HMO). Blue Cross and Blue Shield of Louisiana, incorporated as Louisiana Health Service & Indemnity Co., offers Blue Advantage (PPO). Both are independent licensees of the Blue Cross and Blue Shield Association. Blue Advantage from Blue Cross and Blue Shield of Louisiana HMO is an HMO plan with a Medicare contract. Blue Advantage from Blue Cross and Blue Shield of Louisiana is a PPO plan with a Medicare contract. Enrollment in either Blue Advantage plan depends on contract renewal. AIM is an independent company that serves as an authorization manager for Blue Cross and Blue Shield of Louisiana and HMO Louisiana, Inc. New Directions is an independent company that serves as the behavioral health manager for Blue Cross and Blue Shield of Louisiana and Blue Cross and Blue Shield of Louisiana HMO.

Blue Advantage Partners with Vantage Health Plan

We are excited to announce our new partnership with Vantage Health Plan, a Louisiana-based company with extensive Medicare Advantage experience, including operational resources, that aligns with our long-term strategy for the Blue Advantage networks. For dates of service on and after January 1, 2021, Vantage will assume all services including housing the new Blue Advantage Provider Portal, issuing authorizations, processing claims for 2021 dates of service, customer services and more.

This partnership will allow us to further innovate and impact cost and quality of care, continue to deliver exceptional customer service and improve the health and lives of Louisianians.

Over the past 10 months, providers have received information including updated resource documents, educational webinars and communications about upcoming process changes. The following 2021 Blue Advantage resource documents have been updated to reflect these changes:

- Blue Advantage Provider Administrative Manual
- Blue Advantage Provider Quick Reference Guide
- Blue Advantage Transition FAQs

These resources are available online on the Blue Advantage resource page. Go to www.BCBSLA.com/providers, then click "Go to BA Resources" at the bottom of the page.



2021 Member ID Cards have a NEW Look

Starting January 1, 2021, providers will notice that the member ID cards have a new look, including a color change and new prefixes.

All Blue Advantage members were issued new member ID cards for 2021 services. These ID cards contains their name, copayment amounts and important phone numbers. These cards are used for all types of coverage such as Medicare Part A, Part B and Part D (pharmacy).

NEW 2021 Member ID Cards

Note: New member ID cards do not include primary care provider (PCP) information.



New PPO prefix is PMV for 2021 claims



New HMO prefix is MDV for 2021 claims

Below are samples of the 2020 member ID cards that are valid for services prior to 2021.



Blue Advantage has a NEW Provider Portal for 2021

The Blue Advantage Provider Portal is your one-stop electronic resource for Blue Advantage information. The 2021 Blue Advantage Provider Portal is now active and providers must access it for information regarding 2021 member eligibility, claims status, authorizations and more. Registration is required to access the new portal.

Providers can access the 2021 Blue Advantage Provider Portal through iLinkBlue (www.BCBSLA.com/ilinkblue), then click "Blue Advantage" under the "Other Sites" section.



Not Registered for the Portal

There are two levels of access a person can have to the 2021 Blue Advantage Provider Portal:

- **Group Moderator:**

Person(s) within the provider organization who is designated to complete the initial group registration and thereafter grants access of the user(s) to the Blue Advantage Provider Portal. Blue Advantage requires that each group designates at least one Group Moderator to self-manage user access to the provider portal for your organization. New group registration must be completed by the Group Moderator. This can be completed by selecting "**Register New Group**" on the login screen.



- **User:**

Person(s) at the provider organization who has been granted security access by the Group Moderator and thereafter can self-manage their own portal access only. This can be completed by selecting "**Join an Existing Group**" on the login screen.



Both options will require the completion of the following steps to register for the provider portal:

- Complete and submit the registration form
- Review and sign the Blue Advantage Portal User agreement via DocuSign® (this agreement must be approved before able to proceed to the next step)
- Reset your password

For full details on how to complete portal registration, refer to the 2021 *Blue Advantage Portal User Guide*. It is available on the Blue Advantage Resources page. Go to www.BCBSLA.com/providers, then click "Go to BA Resources" at the bottom of the page.

2021 Billing Changes

The following billing changes are effective January 1, 2021:

Medicare Advantage ASC Claims

- Medicare Advantage ambulatory surgical center (ASC) claims must be submitted on a CMS-1500. If submitted on a UB-04 claim form, it will be denied, and must be resubmitted on a CMS-1500 claim form.

Place of Service for Hospital-based Clinics

When a member is seen by a hospital-based provider, the following will apply:

- Providers must include POS 19 or 22 when services are rendered in hospital-based clinics
Note: site of service reduction will be applied to the professional fee
- Facilities should bill these services under revenue code 510 or 761
- The member's cost share will apply to the professional charge only

Policy Change for RAP Claims for Medicare Advantage Members of Other Blue Plans

Blue Advantage accepts and pays claims designated as Request for Anticipated Payment (RAP) at the beginning of a patient's episode of care. We made a change to our RAP policy for Medicare Advantage members of other Blue Plans.

Effective September 15, 2020, we stopped paying RAP claims when the Medicare Advantage member has a policy issued by a Blue Plan other than Blue Cross and Blue Shield of Louisiana or Blue Cross and Blue Shield of Louisiana HMO. RAP claims can be submitted, but the final claim (end of episode) will be the only claim paid in compliance with your existing contracted rates. This process change will not change or affect your current reimbursement or allowable charges.

Effective January 1, 2021, this policy is also being implemented for Blue Advantage claims.

2021 Claims Processing

Who processes a claim will be based on date of service. Services rendered in 2020 will continue to be processed by Lumeris. Services rendered in 2021 (with a few exceptions*) will be processed by Vantage. Claims can be submitted electronically or hardcopy. For electronically submitted claims, the payor IDs are different. The mailing addresses for hardcopy claims are also different (see chart below).

	Lumeris	Vantage
Electronic Payor ID	84555	72107
Claims Address	P.O. Box 7003 Troy, MI 48007	130 DeSiard St, Ste 322 Monroe, LA 71201

*See exceptions on Page 5 of this newsletter.

Lumeris will accept 2020 Blue Advantage claims through June 30, 2021. On July 1, 2021, and after, claims with a 2020 date of service will be processed by Vantage. See the guide below for details on where a claim should be submitted, based on the date of service and service type. This guide outlines where a claim should be submitted based on dates of service and service type.

Inpatient <i>acute, long-term acute (LTAC), skilled nursing facility (SNF), psychiatric, substance abuse rehabilitation</i>		
Date of Service	Submit to Lumeris	Submit to Vantage
2020 admission submitted before June 30, 2021	✓	
2020 admission submitted after June 30, 2021		✓
Outpatient ER		
Date of Service	Submit Lumeris	Submit to Vantage
2020 begin DOS submitted before June 30, 2021	✓	
2020 begin DOS submitted after June 30, 2021		✓
Outpatient Observation		
Date of Service	Submit to Lumeris	Submit to Vantage
2020 begin DOS submitted before June 30, 2021	✓	
2020 begin DOS submitted after June 30, 2021		✓
Home Health		
Date of Service for 30-day Episode	Submit to Lumeris	Submit to Vantage
2020 begin date of episode submitted after June 30, 2021	✓	
2020 begin date of episode submitted after June 30, 2021		✓
Professional, Ancillary and Other Outpatient Claims		
Date of Service	Submit to Lumeris	Submit to Vantage
2020 dates of services submitted before June 30, 2021	✓	
2020 dates of service submitted after June 20, 2021		✓

The select service types listed below must be split billed when they span the benefit year. Providers should submit a claim to Lumeris for 2020 service dates and submit a claim to Vantage for 2021 service dates.

- Partial Hospitalization (PHP and IOP)
- Mental Health/Behavioral Health/Substance Abuse Counseling
- Nutritional Counseling
- Supervised Exercise Therapy (SET)
- Cardiac and Intensive Rehabilitation
- Pulmonary Rehabilitation
- Durable Medical Equipment (DME) and Supplies
- Chemotherapy/Radiation
- Dialysis
- Physical Therapy
- Occupational Therapy
- Speech Therapy
- Other Therapies

2021 Blue Advantage EFT and ERA Processes

Effective for dates of service on and after January 1, 2021, RedCard will manage all electronic funds transfer (EFT) and electronic remittance advice (ERA) processes.

What does this mean for Blue Advantage Providers?

- 2020 Dates of Service – The EFT and ERA processes in place today will still apply for services rendered in 2020, even when submitted in 2021 (through June 30). Payments for 2020 claims filed on and after July 1, 2021, will be processed through RedCard.
- All 2021 Dates of Service – EFT and ERA will be processed through RedCard.

To streamline the new EFT and ERA enrollment process, a one-time upload of your current Blue Advantage EFT and ERA information to RedCard has been completed. You should have received a notification email from Support, do-not-reply@ach835.com, earlier this month verifying your setup.

If you have multiple provider EFT/ERA accounts, you should have received multiple emails; one for each account. The account NPI and TIN was indicated in each email. This setup was for Blue Advantage only and does not affect your commercial EFT/ERA enrollment.

If you are still not set up with RedCard, you can find the EFT/ERA enrollment form online at www.BCBSLA.com/providers, then click the “Go to BA Resources” link at the bottom of the page. If you have questions about or issues with the enrollment process, you may call RedCard at 1-844-292-4066.



Contacting Blue Advantage

Between December 14, 2020 and January 1, 2021, temporary prompts have been added to the customer service phone line, allowing callers to choose between 2020 services (routes to Lumeris) or 2021 services (routes to Vantage). Beginning January 1, 2021, all calls will be handled directly by Vantage and calls for 2020 services will be transferred to Lumeris as needed.

Customer Service

Phone: 1-866-508-7145

Fax: 1-877-528-5820

The Blue Advantage mailing address is changing for 2021.

Mailing Address

Blue Cross and Blue Shield of Louisiana/HMO Louisiana, Inc.

130 DeSiard St, Ste 322

Monroe, LA 71201



Authorizations

For 2021, there are changes to the services that require prior authorization. The full list is available in the *2021 Blue Advantage Provider Quick Reference Guide*. The guide includes the list of services that require prior authorization, including the list of Part B drugs. It can be found online in two places:

- The new Blue Advantage Provider Portal. Go to www.BCBSLA.com/ilinkblue, then click on “Blue Advantage” under the “Other Sites” section.
- The Blue Advantage Resources page. Go to www.BCBSLA.com/providers, then click on “Go to BA Resources” at the bottom of the page.

2021 Blue Advantage authorization requests will be handled directly by Vantage Health Plan and there are three ways you can submit an authorization for 2021 dates of services:

- Download the appropriate authorization request form from the new Blue Advantage Provider Portal and follow the instructions on the form.
- Submit a request for select outpatient services through the Online Auth Portal feature in the 2021 Blue Advantage Provider Portal.
- Call Blue Advantage Customer Service and choose the appropriate prompts. The customer service number can be found on the back of the member ID card.

For 2021, there are four forms for requesting prior authorizations and they are available on the Blue Advantage Provider Portal as well as the Blue Advantage Resources page:

- Inpatient Authorization
- Outpatient Authorization
- Home Health Authorization
- Behavioral Health Authorization

Use the table below for who handles authorization information (based on date of service):

Prior Authorization Type	2020	2021
Home Health	Lumeris	Vantage
Inpatient Services		
Outpatient Services		
High-tech Radiology	AIM	Vantage
Radiation Oncology		
Office and Outpatient Cardiology		
Outpatient Musculoskeletal		
Behavioral Health	New Directions	Vantage

Extension of authorizations:

To extend an existing 2020 authorization beyond December 31, 2020, submit these new requests to Vantage.



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, Blue Advantage network providers may contact Blue Advantage Customer Service at 1-866-508-7145.

If you are a Quality Blue Primary Care (QBPC) or Quality Blue Value Partnership (QBVP) partner, our Quality Blue teams are accountable for engaging with your practice/entity to share Blue Advantage quality performance updates. Quality Blue questions can be sent to clinicalpartnerships@bcbsla.com. For non-QBPC and QBVP questions specific to the Blue Advantage quality program, you may contact your Provider Relations representative or send an email to provider.relations@bcbsla.com. If you are unsure who your Provider Relations representative is, visit www.BCBSLA.com/providers >Provider Networks >Provider Support.

Provider Pay Disputes

If a provider disagrees with the amount paid on a Blue Advantage claim, they may send a written pay dispute to:

Blue Cross and Blue Shield of Louisiana/HMO Louisiana, Inc.,
Attn: Provider Disputes -
Blue Advantage
130 DeSiard St, Ste 322
Monroe, LA 71201

Your request should outline the basis for the dispute and should include documents supporting your position.

If you are not receiving our communications,
you may need to update your contact
information...

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

COVID-19 Communications

Visit the COVID-19 section of our Blue Advantage Resources page to view the latest Blue Advantage communications related to the novel coronavirus (COVID-19). 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, option 3, option 3

Behavioral Health

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

Blue Advantage Customer Service

1-866-508-7145

customerservice@blueadvantage.bcbsla.com

Blue Advantage Provider Portal

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

Provider Credentialing & Data Management

1-800-716-2299, option 2 (provider credentialing)

1-800-716-2299, option 3 (data management)

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).