

Blue Advantage Insight Newsletter

August 2022

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Louisiana

Blue Advantage (HMO) | Blue Advantage (PPO)

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Blue Cross and Blue Shield of Louisiana HMO offers Blue Advantage (HMO). Blue Cross and Blue Shield of Louisiana, an independent licensee of the Blue Cross Blue Shield Association, offers Blue Advantage (PPO). 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.

Blue Advantage Urges Louisianians to Get Vaccinated, Take Precautions Amid Rising COVID-19 Cases

COVID-19 cases are increasing around the country, with most Louisiana parishes reporting high community transmission levels. Most of these cases involve the BA.4 and BA.5 omicron variants of the virus. Health officials say these variants are more contagious than the original omicron variant, which caused an earlier surge of COVID-19.

Blue Advantage urges everyone to follow health officials' recommendations and get the COVID-19 vaccine or booster as soon as you are eligible.



"It's also important to take other precautions that we know limit the spread of COVID-19 – wash your hands often and wear a mask in crowded, indoor areas. Isolate if you feel sick or know of exposure and get tested as soon as you can," said Dr. Dee Barfield, Blue Cross senior medical director and vice president, Medical Management.

COVID-19 Vaccine and Booster Recommendations

Federal health officials recommend the COVID-19 vaccine for anyone six months and older. Health officials also recommend everyone age 5 and older who has gotten the original COVID-19 vaccine get a booster when eligible, depending on health status and risk factors. People age 12 and older with health conditions that affect their immunity may need a second booster shot.

Blue Advantage covers the COVID-19 vaccine and boosters at \$0 out of pocket for eligible members of individual and employer health plans. Eligible members of Medicare and Medicaid plans or uninsured patients can also get a COVID-19 booster vaccine at no cost. This no-cost coverage is a requirement of the Coronavirus Aid, Relief and Economic Security (CARES) Act. If you have questions about the vaccine's coverage, please reach out to Blue Advantage Customer Service at 1-866-508-7145.

Remind your patients that the Blue Cross and Blue Shield of Louisiana Foundation is sponsoring free ride programs for COVID-19 vaccine and booster appointments statewide. Many community organizations offer similar programs. Members that cannot drive or have other barriers to getting to appointments may call 211 to get connected to programs in their area.

For any members that may be hesitant about the vaccine, Louisiana's COVID-19 vaccine webpage at <https://LDH.La.Gov/CovidVaccine> has information about the vaccine and a list of vaccine locations. You may also refer patients to the state COVID-19 Vaccine Hotline at 1-855-453-0774 to speak with a medical professional. The Blue Cross and Blue Shield of Louisiana YouTube channel has short videos on COVID-19 vaccines and other health topics.

Reimbursement for COVID-19 Treatments

The Centers for Medicare & Medicaid Services (CMS) will reimburse for COVID-19 vaccines and monoclonal antibody treatment claims with 2020 and 2021 dates of service. For dates of service on or after January 1, 2022, the obligation to pay these claims is the responsibility of Blue Advantage.

Providers should not submit claims with 2022 dates of service to Original Medicare. Submit claims for dates of service on and after January 1, 2022, to Blue Advantage. Use the product-specific coding provided by CMS and the American Medical Association.

For questions on this update, please contact Blue Advantage at 1-866-508-7145.

For current and future billing guidelines related to COVID-19, providers should access the COVID-19 section for the Blue Advantage Resources page (www.bcbsla.com/providers, click on "Go to BA Resources" at the bottom of the page).

Use Our Provider Update Form

Our Provider Update Request Form is available for keeping Blue Advantage up to date on important changes made to your practice.

Use the form for the following changes:

- Your demographic information, including the correspondence information we use for our provider communications
- EFT information
- Changing Tax ID Number
- A change in practice location under an existing Tax ID Number
- Provider Group information, if you are an existing provider joining a new group
- Terminating participation in Blue Cross networks

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

When completing the Provider Update Request Form, remember to only complete the sections appropriate for the type of change requested. If you are changing a physical address for a provider group or clinic, you must complete individual Provider Update Request Forms for each individual provider changing locations. Please note that if you have recently filled out this form for any other Blue Cross and Blue Shield of Louisiana network, that contact will update for Blue Advantage as well.

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
Complete this form to report updated information on your practice to Blue Cross and Blue Shield of Louisiana.		
This request applies to: <input type="checkbox"/> Individual Provider <input type="checkbox"/> Provider Group/Clinic		
CURRENT GENERAL INFORMATION		
Provider Last Name	First Name	Middle Initial
Tax ID Number	Provider National Provider Identifier (NPI)	
Group/Clinic Name	Group/Clinic National Provider Identifier (NPI)	
Are you a primary care provider (PCP)? <input type="checkbox"/> yes <input type="checkbox"/> no		
If you are an authorized representative completing this form on behalf of a provider, please indicate below.		
AUTHORIZED REPRESENTATIVE		
Name		
Contact Phone Number	Contact Email Address	
Submission Information (form completed by)		
Signature of Authorized Representative	Date	
Provider Attestation (where applicable)		
Signature of Provider	Date	
TYPE OF CHANGE NEEDED		
Check all applicable boxes below to indicate the information you wish to change. This allows you to complete the required sections of the forms, as appropriate.		
<input type="checkbox"/> Demographic Information	<input type="checkbox"/> Electronic Funds Transfer (EFT) Termination or Change (does not apply for Blue Advantage EFT update)	<input type="checkbox"/> Existing Providers Joining a New Provider Group
<input type="checkbox"/> Terminate Network Participation	<input type="checkbox"/> Tax ID Number Change	<input type="checkbox"/> Add New Practice Location (Existing Tax ID)
<input type="checkbox"/> Remove Practice Location (Existing Tax ID)		
If you have any questions, please contact Provider Credentialing & Data Management at Phone: 1-800-716-2299, option 3 Email: PCDMStatus@bcbsla.com		
2300231 8/11/20 Blue Cross and Blue Shield of Louisiana is an independent licensee of the Blue Cross and Blue Shield Association and incorporated as Louisiana Health Service & Indemnity Company.		

New Processing for Blue Advantage EFT and ERA Transactions

Later this year, Blue Advantage is transitioning its electronic funds transfer (EFT) and electronic remittance advice (ERA) 835 business from RedCard to Blue Cross and Blue Shield of Louisiana. Once this transition takes place, all payments will be made through Blue Cross. Blue Advantage providers should continue to use the Blue Advantage Provider Portal for claims research and payment information.

The table below has details on how this transition could affect you. It is important that if you are not currently enrolled to receive Blue Cross EFT and ERA, that you do so to ensure continued receipt of these electronic services.

	Already Enrolled with Blue Cross	Has Never Enrolled with Blue Cross
EFT	No additional EFT registration is required. You will continue to use the same trading partners you have in place for submitting your Blue Advantage claims. You will file your Blue Advantage claims the same as you do today and instead receive direct payment from Blue Cross.	To receive electronic payments for your Blue Advantage claims, you MUST enroll for EFT with Blue Cross. The Blue Cross EFT Enrollment Form is available in DocuSign format at www.bcbsla.com/providers >Electronic Services >Electronic Funds >Quick Links.
ERA	Because you are enrolled to receive 835 ERA transactions from Blue Cross for your non-Blue Advantage claims, no action is required. Once we transition, you will receive your Blue Advantage ERAs from Blue Cross instead of RedCard.	You must register with Blue Cross to receive your ERAs for your Blue Advantage claims. To enroll, complete the ERA Enrollment Form. It is available at www.bcbsla.com/providers >Electronic Services >Clearinghouse Services >Quick Links.

If you have any questions about EFT, you may email our Provider Relations Department at provider.relations@bcbsla.com. Please put "BA EFT-ERA" in the subject line. If you have questions about setting up your Blue Cross ERA, you may contact our EDI Department at EDIServices@bcbsla.com or by phone at 1-800-716-2299, option 3.

RedCard is an independent vendor that currently serves as the administrator for Blue Advantage electronic funds transfer (EFT) and electronic remittance advice (ERA) transactions.



Discussing Medication Adherence with Your Patients

Medication adherence can be a barrier to health and happens for many reasons. If you find yourself with a patient struggling to stick to a medication regimen, it helps to start the conversation with empathy and open-ended questions or statements, such as:

"Taking medicine can be hard for a lot of reasons. Has this been the case for you? Tell me what keeps you from taking your medicine as prescribed."

Here are some barriers that may prevent patients from taking medication as directed and a few things you might say to help remove those barriers:

"I keep forgetting to take it."

"Take your medicine as part of a daily activity like brushing your teeth or at mealtimes. Use pill boxes to help you see if you have already taken your medicine. Set reminders on your phone."

"It costs too much."

"Let's try a lower cost alternative. Let's check your covered drug list for an effective, lower cost drug that I believe will work for you."

"I forgot to get a refill."

"I'll write your prescription for a 90-day supply, if your plan will allow, to save trips to the pharmacy. Ask your pharmacy if it has a refill reminder service or automatic refill program so you won't forget."

"I can't get to the pharmacy."

"I can send your prescription to a pharmacy that will deliver your medicine to you. Some pharmacies may help you get all your regular medicines on a set schedule, so you can pick them up on one day."

"It doesn't seem to be working."

"Let's talk about how your drug works with your health problem, and how we plan to adjust your treatment over time if needed."

"I can't handle the side effects."

"Let's talk about the common side effects and ways to manage them. Taking your medicine at a certain time of day or with food can help. If side effects don't get better, let's discuss your options."

"I don't think I'm doing it right."

"The nurse or I will show you how to give yourself this medicine. If you have questions, call us or ask your pharmacist when you pick up your next fill."

"I don't always need it."

"Even on days when you feel well, you still need to take your medicine. There are benefits to sticking with the plan. Let's go over those and the risks you may have if you don't."

Provider Credentialing and Telehealth

Blue Advantage credentialing policy includes guidance for the provision of telehealth services to our members in the following scenarios:

In-network provider (Louisiana-based)

In this scenario, a telehealth provider must be in the process of, or completed standard credentialing/contracting to become a provider in our network. We require the provider to be employed or affiliated with a physical practice located in Louisiana. Blue Advantage will identify in-network providers who offer telehealth services in our online provider directories.



Out-of-state provider employed/affiliated with an in-state practice

In this scenario, we require out-of-state telehealth providers be employed or affiliated with a Louisiana-based group or entity. The Louisiana group or entity must complete or be in the process of completing standard credentialing/contracting to become a network provider.

Blue Advantage will identify out-of-state telehealth providers employed/affiliated with an in-state practice in our online provider directories. Submit the following required documentation to the Provider Credentialing & Data Management Department:

- Louisiana state licensure
- Louisiana Telehealth Permit (Required under the Louisiana State Board of Medical Examiners and includes the condition of maintaining affiliation with a Louisiana based practice or entity)

Out-of-state provider without in-state practice affiliations

In this scenario, we require an out-of-state telehealth provider without a Louisiana-based practice affiliation to be credentialed/contracted with Medicare.

The telehealth provider can be individually credentialed/contracted or part of a group or entity that is credentialed/contracted with Medicare. Claims filing is based on where the provider is physically located when rendering the telehealth service.

National telehealth solution/vendor

In this scenario, a national telehealth solution contracts directly with Blue Advantage to offer our members telehealth services accessible in the home plan region and outside of it to ensure access while members are out of their home plan area.

The Blue Cross Blue Shield Association developed guidelines for these telehealth solution/vendor relationships that allows for contracting and claims filing. As the home plan, we initiate a Telehealth Consent Agreement with other Blue Plans in regions where the national telehealth solution/vendor offers providers or services.

Nurse First Assistants Invited to Join Blue Advantage

Certified registered nurse first assistants (CRNFAs) and registered nurse first assistants (RNFAs) now have the option to participate in Blue Advantage. They must meet the following criteria to participate:

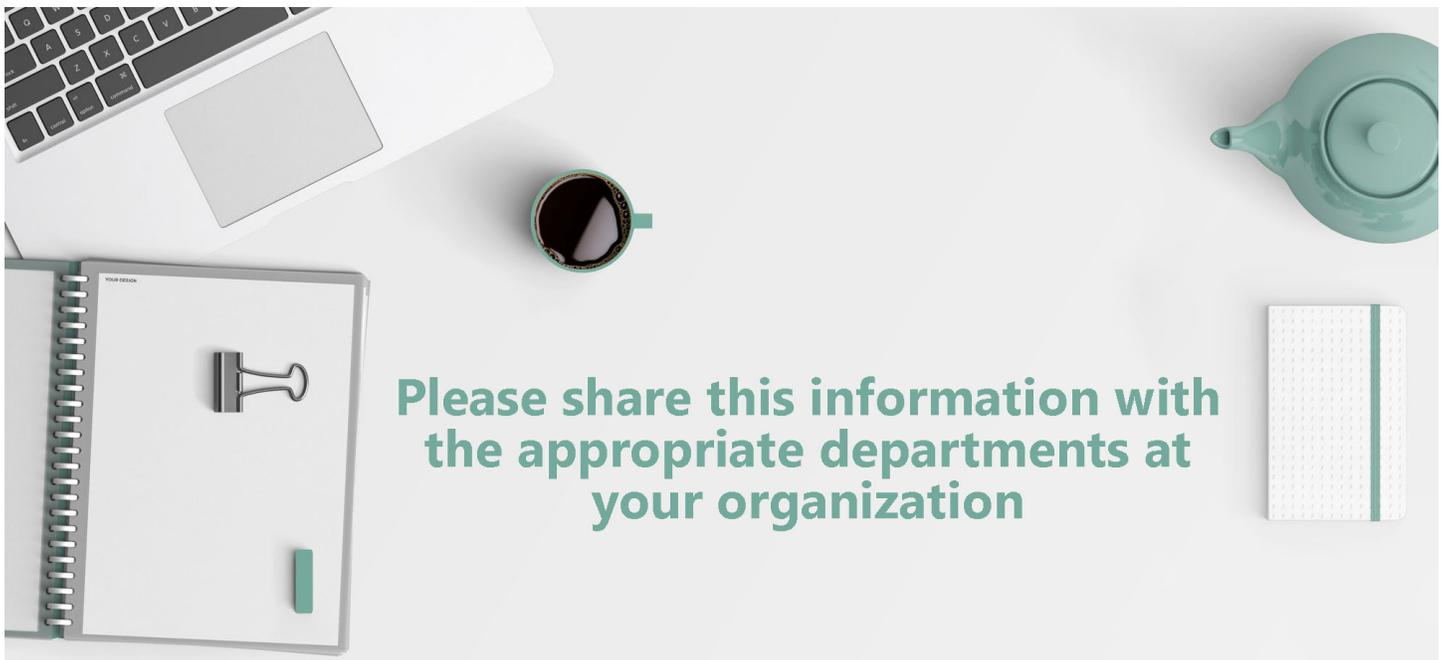
- RN or APRN license and CRNFA or RNFA license.
- Malpractice Insurance \$100,000/\$300,000 with LPCF; or \$1,000,000/\$3,000,000 without LPCF or self-insured (you may supply insurance through the collaborating physician).
- Collaborating physician must participate in the same networks as the certified nurse first assistant. Collaborating physician agreement must be submitted with credentialing application.
- Currently participating in the Medicare program.

To start the process for network participation, you must first complete credentialing. Access our Professional Initial Credentialing Packet online at www.bcbsla.com/providers >Provider Networks >Join Our Networks >Professional Providers >Join Our Networks. You can complete, sign and submit the credentialing packet digitally through DocuSign. The credentialing process takes up to 90 days.

Note on Subrogation

Blue Advantage subrogates with other liability carriers to recoup CMS funds when necessary. This happens through Section 1862(b) of the Social Security Act. It grants Medicare a priority right of recovery in situations involving settlements to beneficiaries by third-party liability insurance.

Claims that contain potential third-party liability will be paid by Blue Advantage on a conditional basis. We will be permitted to recoup any payments if/when a settlement is reached. Blue Advantage allowable charges will still apply.



Blue Advantage Workshops Coming in November

Blue Advantage will host our provider workshops in person this November. Attending these events require preregistration. We email workshop invitations a month before the events. If you do not receive an invite to one of our workshops, contact Provider Relations at provider.relations@bcbsla.com. Please include the date and location you wish to attend in your email.

These workshops will feature sessions at 9 a.m. for professional providers and 1 p.m. for facility providers on the dates listed below. They

focus on topics including appeals, authorizations, billing and coding, credentialing, disputing claims, medical documentation, quality programs, resources, telehealth and much more.



The Blue Advantage Workshops will take place in the following locations:

- November 8: Monroe
- November 9: Pineville
- November 10: Lafayette
- November 15: Metairie
- November 16: Baton Rouge

Additionally, we will be offering a behavioral health webinar for Blue Advantage providers on November 17. Our behavioral health webinar will feature sessions at 10 a.m. and 2 p.m. and offer information on a variety of topics, including credentialing, networks, billing and claims, authorizations, pharmacy, documentation, referrals and navigating our online services and resources. Plus, an overview of services offered by New Directions, our partner in the administration of behavioral health services.

For our webinars, we send Upcoming Provider Training Events emails to providers twice a month. These emails include registration links to upcoming webinars. Once registered, a confirmation email is sent with attendance instructions.

Wellness Visits Can Mean Additional Reimbursement to Providers

As part of our ongoing program to improve our members' health, primary care providers can earn an additional \$100 for completing 2022 Annual Wellness Coupons.

Once completed, fax the form to 1-844-843-9770.

Annual wellness visits are essential to health management. They provide opportunities to monitor known issues and may help your patients spot problems early.

This program provides members a personalized coupon based on past and often overlooked diagnoses. They then schedule a wellness visit and bring the coupon with them. These coupons serve as an easy reference tool for providers to see what diagnoses may be applicable to the member.

If a member comes in with one of these coupons, providers should review the diagnoses listed and mark any additional codes that are applicable.

2022 ANNUAL WELLNESS EXAM COUPON - DO NOT DISCARD

If you have any questions, please call 1-844-753-1450 (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 code Z00.01 as primary, together with all other appropriate ICD-10 diagnosis codes including any other diagnoses on the back of this page.

CODES TO BILL:

Annual Wellness Exam - G0439

AND THE FOLLOWING SCREENINGS:

85025 CBC	For Diabetics, add the following:
80053 CMP	83036 HgbA1C
80061 Lipid panel	82043 Urine Microalbumin
81002 Urine Dip	Schedule an annual eye exam for retinopathy screening
93000 EKG if indicated (e.g., regular heart rhythm)	
82270 FOBT x 3 for patients 50-75	For Females, consider the following:
G0328 iFOBT x 1	Mammogram and Pap Smear

Patient specific considerations:
Flu Shot, Wellness Visit

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
Y0132 21-247 MKLA C



Providers may be asked to submit a corrected claim if diagnoses marked on the coupon are not billed on the claim.

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 provider performs and reports CPT® code G0438 or G0439 for the wellness visit.

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

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, 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.



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 health care 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, 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 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).**