

Blue Advantage Insight Newsletter

December 2022

In this edition:

page article

- 2 [Help Members be Stronger Than Diabetes](#)
- 3 [2023 Provider Resources Available Online](#)
- 4 [Pay for Performance Medicare Advantage Star Rating Incentive](#)
- 4 [Advanced Beneficiary Notices](#)
- 5 [Affinity Health Group Conducting Population Health Visits](#)
- 6 [Things to Remember When Using the Blue Advantage Provider Portal](#)
- 6 [Blue Advantage Credentialing](#)
- 7 [Medication Therapy Management Program](#)
- 8 [Flex Cards for Blue Advantage Members Coming in 2023](#)
- 9 [Blue Advantage Webinars in 2023](#)
- 9 [Use Our Provider Update Request Form](#)



Louisiana

Blue Advantage (HMO) | Blue Advantage (PPO)

18NW2756 R12/22
Y0132_22-516_PVLA_C

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).

Help Members be Stronger Than Diabetes

Louisiana has one of the highest rates of diabetes in the United States and Blue Advantage is raising awareness of steps members can take to lower risks and improve health outcomes.

“A little over 14% of adults in our state have diabetes,” said Dr. Dee Barfield, Blue Advantage senior medical director and vice president, Medical Management. “It is one of the leading causes of death in Louisiana. Even more alarming, there are many Louisianians living with pre-diabetes, which means their blood sugar levels are higher than normal and put them at increased risk for developing diabetes, but they don’t know it.”



Dr. Barfield stresses diagnosis and early intervention with lifestyle changes like adopting a healthy diet, exercising and managing stress. Through these methods, many patients can prevent or improve their risks from diabetes.

“That’s why it’s so important to have at least one checkup a year with patients,” she said. “Check their blood sugar numbers and review family and medical history with them, so you can let them know specific risks and opportunities for health improvement. The sooner they realize their blood sugar levels are high, the sooner you can take steps to address it.”

People who have diabetes are at a higher risk for health issues affecting their eyes and vision, feet or limbs, kidneys and nerves. That means they may need more frequent checkups, Dr. Barfield added.

“Help members monitor their blood sugar levels over time and make sure stay up to date on any diabetes-related screenings they should have, like foot exams, retinal eye exams or kidney monitoring,” she said. “These can help prevent more severe outcomes from diabetes.”

Learn more about helping members stay on top of diabetes through the Blue Cross and Blue Shield of Louisiana YouTube channel (www.youtube.com/bcbsla) to see short health and wellness videos. Subscribe to know when new videos are available.

2023 Provider Resources Available Online!

Blue Advantage released updated versions of its provider manual and other reference guides for use in 2023. We encourage providers to review these documents carefully to understand the changes that will apply for services on and after January 1, 2023.

The following updated documents include a “2023” marker:

- Blue Advantage Provider Administrative Manual – for providers in the Blue Advantage networks and includes contact information, billing guidelines, general policies and more.
- Blue Advantage Provider Quick Reference Guide – includes the full lists of services that require prior authorization, including Part B drugs.



Summary of Changes

In the back of the manual there is a Summary of Changes that outlines changes that apply for January 1, 2023, and after.

Available Online

Blue Advantage materials can be found online in two places:

- On the Blue Advantage Provider Portal – log into iLinkBlue (www.bcbsla.com/ilinkblue) then click on “Blue Advantage” under the “Other Sites” section.
- On our Provider page – visit www.bcbsla.com/providers and click on “Go to BA Resources” at the bottom of the page.



Louisiana Blue Advantage (HMO) Blue Advantage (PPO)	
The purpose of this guide is to help Blue Advantage network providers reach the appropriate areas of service for our Blue Advantage (HMO) and Blue Advantage (PPO) members.	
2023 Provider Quick Reference Guide	
Service	Contact Information
Blue Advantage Customer Service	For inquiries that cannot be addressed through the Blue Advantage Provider Portal, you may contact Blue Advantage Customer Support at: phone: 1-866-508-7145 fax: 1-877-528-5820 email: customerservice@blueadvantagebcbsla.com mail: Blue Cross and Blue Shield of Louisiana/HMO Louisiana, Inc. 130 Desiard St, Ste 322 Monroe, LA 71201
Blue Advantage Provider Portal	The Blue Advantage Provider Portal is accessible through iLinkBlue (www.bcbsla.com/ilinkblue). Click on “Blue Advantage” under the “Other Sites” section. This portal includes member eligibility and benefits verification, as well as claims status options, prior authorization services and more. Portal Registration: Registration for the Blue Advantage Provider Portal requires two separate security access setups. 1. You must first have access to iLinkBlue (www.bcbsla.com/ilinkblue). Refer to the PMA Team section of this guide for more information. 2. Once logged into iLinkBlue, click the “Blue Advantage” link located in the “Other Sites” section to access the Blue Advantage Provider Portal. You can then self-register for access as a Moderator or a User under an existing Moderator. Technical Support: For technical questions relating to registration or login access to the Blue Advantage Provider Portal: phone: 1-866-508-7145, choose option 3, then option 2
Blue Advantage Provider Directory	For a list of providers in our Blue Advantage network, use Blue Advantage’s Provider Directory. It is located within the Blue Advantage Provider Portal.

Pay for Performance Medicare Advantage Star Rating Incentive

Blue Advantage primary care providers (PCPs) play an important role closing gaps in care for preventive wellness and chronic diseases. On September 1, 2022, we notified all BA network PCPs that Blue Advantage is optimizing the reimbursement through a Pay for Performance Medicare Advantage Star Rating Incentive (P4P MA SI) module, related to outcomes surrounding population health measures.

As of October 1, 2022, all PCPs participating in a Blue Advantage network are eligible to receive performance incentive payments for calendar year 2022 and subsequent calendar years based on closing gaps in care for population health measures. This P4P MA SI is administered by Vantage Health Plan. Vantage Health Plan is part of the Blue Cross enterprise and will be distributing performance reports and payments on our behalf.

We are structuring the P4P MA SI like the Blue Advantage Primary Care Provider Pay for Performance (QB BA PCP P4P) module that is part of the Quality Blue (QB) program. For BA PCPs in the QB program, self-contracted or contracted with another QB Provider, your QB BA PCP P4P agreement remains the same.

We continue to look for opportunities to improve outcomes on the population health measures for our Blue Advantage members.

Quality Blue BA Pay for Performance Module Updates

For Quality Blue (QB) providers, the BA P4P MA SI for Performance Year 2023 were sent to providers on November 1. This communication was sent to program, contract and IT functional representatives. Reach out to your QB Provider contact if you have not yet received this information.



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 specific services outlined in the IDN after services are rendered.

Affinity Health Group Conducting Population Health Visits



Blue Advantage developed a population health visit program to better identify and meet the health care needs of our members—your patients. Affinity Health Group is partnering with us to help close care gaps for patients that have not met with their primary care physician this calendar year. Affinity, on behalf of Blue Advantage, will be contacting eligible members to schedule and perform a population health visit.

Population health visits include an assessment of patient's health risk and preventive service needs, as well as a thorough medical evaluation provided by an Affinity nurse practitioner or physician assistant.

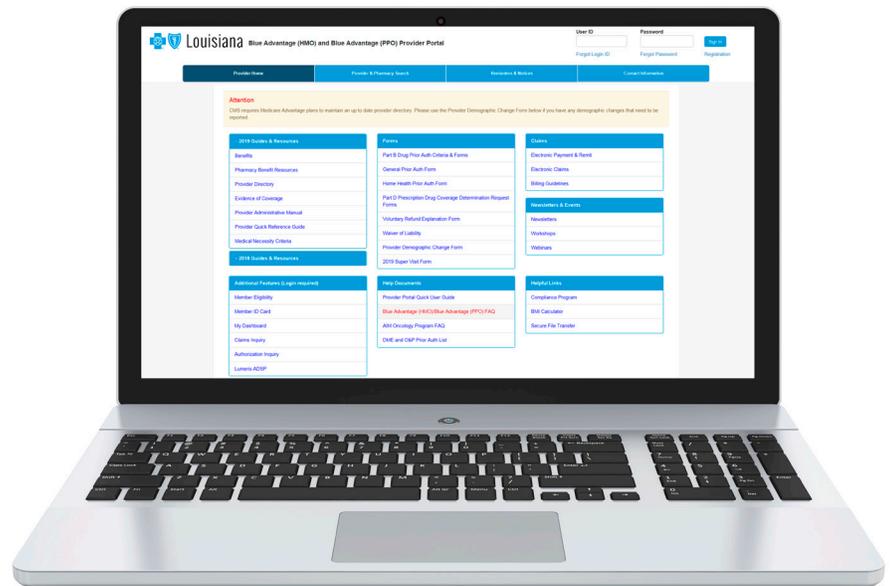
We developed these visits to supplement your current medical chart and should not replace a patient's routine physical. Once Affinity completes the population health visit, all medical information will be sent to your office to include in your patient's medical record. This information may be helpful in developing a plan of prevention and awareness for your patient.

Please contact Affinity Health with any questions or concerns on this program at 1-833-949-2788, Monday through Friday, 8 a.m. to 5 p.m. Teletypewriter (TTY) users should call 711.



Things to Remember When Using the Blue Advantage Provider Portal

- Cookies must be enabled for the portal site in order to log in and access all portal features.
- Google Chrome is the best browser to access the Blue Advantage Provider Portal.
- The portal requires multi-factor authentication (MFA) when logging in.



Blue Advantage Credentialing

Initial credentialing for Blue Advantage requires a Louisiana Standard Credentialing Application (LSCA) through DocuSign®. For questions on the initial credentialing process, contact Blue Advantage Provider Credentialing and Data Management at PCDMStatus@bcbsla.com or 1-800-716-2299, option 2.

Recredentialing can be submitted using either LSCA or Council for Affordable Quality Healthcare (CAQH) applications. Recredentialing questions should be directed to Vantage Health Plan at recredentialing@vhpla.com or (318) 807-4755.



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.

Medication Therapy Management Program

The Medication Therapy Management (MTM) Program is a service for members—your patients—with multiple health conditions taking multiple medications. Completion of the comprehensive medication review for qualifying members is a Part D Medicare Stars Quality Measure. The MTM program helps your patient make sure that medicines are working to improve health outcomes.

The MTM targets members who meet the following criteria:

- Have three or more chronic conditions.
- Take eight or more select maintenance medications.
- Spent \$1,233 in the previous three months on Part D covered medications.

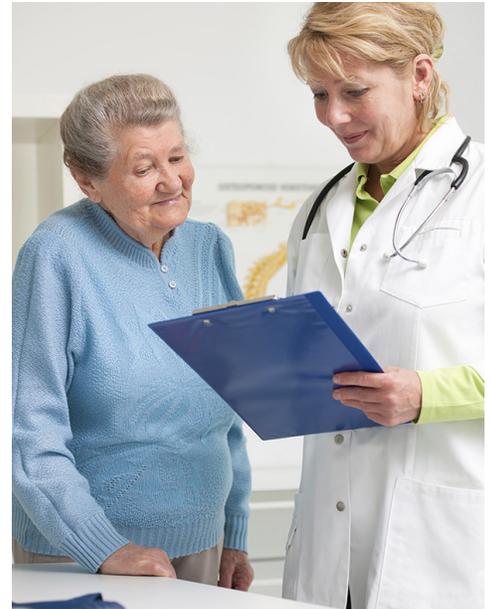
Members will be invited to schedule a Comprehensive Medication Review (CMR) with an MTM-certified pharmacist. This review includes:

- A look at the member's entire medication profile (including prescriptions, over-the-counter drugs, herbal supplements and samples).
- A discussion of directions and the purpose of each medication with documentation provided to the member after completion of the call.
- Answers for any additional questions or concerns.

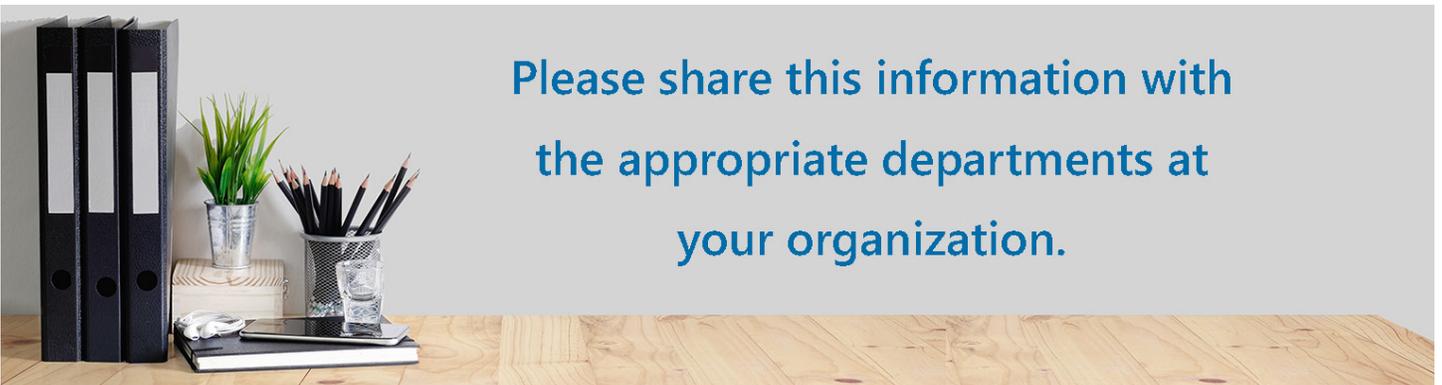
After the completion of a CMR, you and your patient will receive a detailed report. The pharmacist performing the CMR may contact you directly in the event a significant drug therapy problem is identified.

Every three months the medications will be reviewed, and you or your patient will be contacted about changes in their medications.

Encouraging your patients to complete the CMR, when offered, helps lead to better results in improved medication safety and potential cost savings for the member.



**Please share this information with
the appropriate departments at
your organization.**



Flex Cards for Blue Advantage Members Coming in 2023

In 2023, all Blue Advantage members will receive a Blue Advantage Flex Card. This prepaid debit card will have \$925 to pay for out-of-pocket costs, including:

- \$500 for prescription hearing aids
- \$225 for eyewear like eyeglasses and contact lenses
- \$50 quarterly* for other over-the-counter medical supplies at major retailers or online.



Claims for exams and visits will be separate from Flex transactions. For medical claims, use the Blue Advantage member ID card and bill claims to Blue Advantage. Use the Flex Card for other purchases.

For example, if a member has a scheduled eye exam and wishes to purchase new glasses or contacts, file the eye exam as a claim through Blue Advantage. The member can use the Flex Card when selecting their frames or contacts. If the cost of a member's eyewear purchase is more than their Flex Card's eyewear allowance, the member is responsible for the remaining amount owed.

Being an in-network provider does not guarantee Flex Card transactions will process. To ensure Flex Card funds debit properly, you must have the following merchant category codes in your point-of-sale system:

Vision

- 8042 – Optometrists & Ophthalmologists
- 8043 – Opticians, optical goods and eyeglasses
- 8044 – Optical goods and services

Hearing

- 5975 – Hearing aid sales, service and supply stores
- 8011 – Doctors not classified elsewhere
- 8099 – Medical services and health practitioners not classified elsewhere

If you are unable to process these transactions, advise members to request a reimbursement form from Blue Advantage by calling the Flex Card Help Line at 1-833-952-2772 (TTY 711) Monday through Friday, 7 a.m. to 7 p.m.

We hope this new benefit will increase access and satisfaction for both providers and Blue Advantage members. If you have questions about this program, please contact Blue Advantage Customer Service at 1-866-508-7145 (TTY711), or email customerservice@blueadvantage.bcbsla.com.

* This \$50 will add automatically once each quarter.

Blue Advantage Webinars in 2023

Keeping our providers up to date with important Blue Advantage information is a priority for us. We will host several provider webinars throughout the upcoming year, with dates and times to be announced in the coming weeks.

Invitations are sent via email a month before scheduled webinars. These webinar topics include New to Blue Advantage, Blue Advantage Wellness Coupons, behavioral health, credentialing and more.

Missed any of our webinars?

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

Use Our Provider Update Request 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.

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		
23007231 R11/20 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.		

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, 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).**