Blue Cross and Blue Shield of Louisiana Member Provider Policy & Procedure Manual (for facility providers)

This manual is designed to provide information a Member Provider (sometimes referred to in this manual as "Facility" or "Facility Provider") will need as a participant in the Blue Cross and Blue Shield of Louisiana (Louisiana Blue) Member Provider Network — it is an extension of your Member Provider Agreement.

To use this manual, first familiarize yourself with the Quick Reference Guide, Table of Contents, Definitions section and Summary of Changes section.

Periodically, we send newsletters and informational notices to providers. Please keep this information and a copy of your respective provider agreement(s) along with this manual for your reference. Updated office manuals and provider newsletters may be found on the Provider page of our website (www.lablue.com/providers).

If you have questions about the information in your manual or your participation as a network provider, please email provider.contracting@lablue.com.

LOUISIANA BLUE

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HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA).

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.

This manual is provided for informational purposes only and is an extension of your Member Provider Agreement. You should always directly verify the member's benefits prior to performing services. Every effort has been made to print accurate, current information. Errors or omissions, if any, are inadvertent. The Member Contract/Certificate contains information on benefits, limitations, exclusions and managed care benefit requirements. It also may limit the number of days, visits or dollar amounts to be reimbursed.

As stated in your agreement: This manual is intended to set forth in detail Louisiana Blue policies. Louisiana Blue retains the right to add to, delete from and otherwise modify the *Member Provider Policy & Procedure Manual* as needed. The *Member Provider Policy & Procedure Manual* and other information and materials provided are proprietary and confidential and may constitute trade secrets.

Quick Reference Guide

This reference guide contains the contact information for the services listed within this manual. Please refer to this guide as needed when reading this manual.

Appeals	Please mail appeals to the appropriate address: **Standard Administrative Appeal** Medical Benefits: Louisiana Blue Appeals and Grievance P.O. Box 98045 Baton Rouge, LA 70898-9045 Pediatric Dental Care Benefits: (applicable to non-grandfathered individual and small group plans only) Louisiana Blue Dental Customer Service P.O. Box 69420 Harrisburg, PA 17106-9420 Pediatric Vision Care Benefits: (applicable to non-grandfathered individual and small group plans only) Louisiana Blue c/o Davis Vision P.O. Box 791 Latham, NY 12110 **Standard Medical Appeal** (for expedited medical appeals, include Attn: Expedited Medical Appeal) Louisiana Blue Medical Appeals P.O. Box 98022 Baton Rouge, LA 70898-9022 Fax: (225) 298-1837

Authorizations	To request prior authorization for services, providers are required to use the authorizations applications that are available on the company's secure electronic portal, iLinkBlue (www.lablue.com/ilinkblue). Louisiana Blue requires providers to submit prior authorization requests, including new requests and extensions, through our online Louisiana Blue Authorizations application. Exceptions include transplants, dental services covered under medical and most out-of-state services. **Utilization Management Programs** Use the Carelon application for our high-tech imaging, cardiology, genetic testing, musculoskeletal (MSK), radiation therapy and sleep management programs. This is the Carelon Medical Benefits Management (MBM) Provider Portal. **Authorization Phone Numbers** Louisiana Blue Authorizations Department: **Phone:** 1-800-523-6435 / **Fax:** 1-800-586-2299 Louisiana Blue Behavioral Health Authorizations Department: **Phone:** 1-800-991-5638 For our Utilization Management programs: **Carelon:** 1-866-455-8416 **Drug** To request prior authorization for a drug, use the Drug Authorization Form, available online at www.lablue.com/providers >Pharmacy. A sample of this form is provided in Appendix II Forms at the end of this manual. You may also call: For Pharmacy Benefit Drug Authorizations: • Express Scripts, Inc. at 1-800-842-2015 For Medical Benefit Drug Authorizations: • Targeted Medications – Express Scripts, Inc./Care Continuum at 1-800-842-2015 • Non-targeted Medications – Louisiana Blue at 1-800-523-6435

Authorizations (continued)	**Louisiana Blue Authorizations Application Issues** For errors involving: • Internal server error message – call Electronic Data Interchange (EDI) Services at 1-800-716-2299, option 3 • Internet errors on provider landing page – call EDI Services at 1-800-716-2299, option 3 • Unable to submit or locate a submitted authorization – email Provider Relations at provider.relations@lablue.com • Internet errors within the application – email Provider Relations at provider.relations@lablue.com (Please include a screenshot of the error, if possible) For gaining access to the application in iLinkBlue: • Reach out to the administrative representative at your facility or organization to discuss your security access in iLinkBlue • If you do not have an administrative representative, your organization will need to designate at least one person to register as an administrative representative. Find the Administrative Representative Registration Packet at www.lablue.com/providers >Electronic Services >Designate Your Rep. Full information on how to access iLinkBlue, including the registration application, is available online at www.lablue.com/providers >Electronic Services >iLinkBlue. **Retrospective Review Authorizations** To request a retrospective authorization, use the Retrospective Review Authorization Form available at www.lablue.com/providers >Resources >Forms. You may request a retrospective review in one of two ways: • Fax the Retrospective Review Authorization Form to 1-800-515-1150. • Upload the Retrospective Review Authorization Form and medical records through iLinkBlue. Click on the Document Upload link on the homepage, then select "Medical Records for Retrospective or Post Claim Review" from the department dropdown.
BlueCard® Eligibility	Call BlueCard Eligibility to verify patient eligibility and benefits. You can receive real-time responses to your eligibility requests for out-of-area members between 6 a.m. and midnight, Central Time, Monday – Saturday. **Phone:** 1-800-676-BLUE (1-800-676-2583)

Care Management Programs	Louisiana Blue offers many long-standing, results-driven programs to support your patient relationships and help our mutual customers — your patients, our members — achieve their health and wellness goals. Providers can refer members by: • Submitting the Population Health Referral Form through iLinkBlue (www.lablue.com/ilinkblue). Click "Document Upload," then "Population Health" in the drop-down menu. • Sending the Population Health Referral Form to PopulationHealthSpecialist@lablue.com. • Faxing the Population Health Referral Form to (225) 298-3184. • Calling Population Health at 1-800-317-2299, Monday – Friday, 8 a.m. to 5 p.m. (except holidays) Locate the Population Health Referral Form at www.lablue.com/providers >Programs >Care Management >CMDM Referral Form. Members can self-refer by calling 1-800-821-2749, Monday – Friday, 8 a.m. to 5 p.m. (except holidays). Patients who are already in a Care Management Program and do not wish to continue participating can call the number above to opt out.
Claims	**Electronic:** Please submit electronic claims through Louisiana Blue-approved clearinghouse locations. For more information about filing claims through approved clearinghouse locations, visit the Clearinghouse section of our Provider page (www.lablue.com/providers >Electronic Services >Clearinghouse Services). CMS-1500 electronic claims may also be submitted through iLinkBlue (www.lablue.com/ilinkblue). **Hardcopy:** Louisiana Blue Claims Department P.O. Box 98029 Baton Rouge, LA 70898-9029 **Federal Employee Program (FEP) Claims:** Louisiana Blue Claims Department P.O. Box 98028 Baton Rouge, LA 70898-9028

Complex Case Management Program	Louisiana Blue's Complex Case Management Program is designed to help members with complex diseases to regain optimal health or improve functional capacity. Providers can refer members by: • Submitting the Population Health Referral Form through iLinkBlue (www.lablue.com/ilinkblue). Click "Document Upload," then "Population Health" in the drop-down menu. • Sending the Population Health Referral Form to PopulationHealthSpecialist@lablue.com. • Faxing the Population Health Referral Form to (225) 298-3184. • Calling Population Health at 1-800-317-2299, Monday – Friday, 8 a.m. to 5 p.m. (except holidays) Locate the Population Health Referral Form at www.lablue.com/providers >Programs >Care Management >CMDM Referral Form. Members can self-refer by calling 1-800-821-2749, Monday – Friday, 8 a.m. to 5 p.m. (except holidays). Patients who are already in the Complex Case Management Program and do not wish to continue participating can call the number above to opt out.
Customer Care Center	Providers are required to use our self-service tools for member eligibility, claim status inquiries, professional allowable searches and medical policy searches. Our self-service options are: • iLinkBlue (www.lablue.com/ilinkblue) • Interactive Voice Recognition (IVR) 1-800-922-8866 • HIPAA 27x Transactions - 1-800-716-2299, option 3 Network providers may call the Customer Care Center for all other inquiries. Please have your National Provider Identifier (NPI), the member ID number, patient date of birth and the date of service when calling. **Phone:** 1-800-922-8866

Customer Service for Federal Employee Program (FEP) Members	For questions regarding the Federal Employees Health Benefits (FEHB) program: **Phone:** 1-800-272-3029 For questions regarding the Postal Service Health Benefits (PSHB) program: **Phone:** 1-844-275-2583
Disputes	Participating providers' claims disputes can be submitted electronically using an online provider dispute form accessed through iLinkBlue (www.lablue.com/ilinkblue). You will have an option to open the electronic dispute form when viewing a claim on iLinkBlue. To view processed claims in iLinkBlue, go to the Claims menu option. Then select "Claims Status Search" and use the Paid/Rejected tab to search for a claim.
EDI Services	Claims may be submitted electronically to Louisiana Blue directly from your office or through an approved clearinghouse. For more information about filing claims electronically or identifying approved clearinghouse locations, please contact the Louisiana Blue Electronic Data Interchange (EDI) Services: **Email:** EDIservices@lablue.com **Phone:** 1-800-716-2299, option 3
Electronic Funds Transfer (EFT)	All providers must be part of our EFT program. With EFT, Louisiana Blue deposits your payment directly into your checking or savings account. For more information on EFT, visit the EFT section of the Provider page at www.lablue.com/providers >Electronic Services >Electronic Funds or contact us: **Email:** PCDMstatus@lablue.com **Phone:** 1-800-716-2299, option 2

iLinkBlue	iLinkBlue (www.lablue.com/ilinkblue) is a free online provider tool that includes services such as: • Eligibility verifications • Benefits (copayments, deductibles and coinsurance) • Claim statuses (paid, rejected and pended) • Allowable charges • Action requests • Payment registers • Medical policies • Authorization requests For questions regarding iLinkBlue issues, please contact EDI Services: **Email:** EDIservices@lablue.com **Phone:** 1-800-716-2299, option 3 For iLinkBlue training, please contact Provider Relations: **Email:** provider.relations@lablue.com
Medical Policy Inquiry	Medical policy coverage eligibility guidelines or investigational status determination of treatments, procedures, devices, drugs or biological products will be considered upon written request by a member provider. **Hardcopy:** Louisiana Blue - Medical Director of Medical Policy P.O. Box 98031 Baton Rouge, LA 70809-9031
Overpayments	If you believe an overpayment has occurred on a claim, you may submit a review of the claim as follows: 1. Submit an Action Request (AR) through iLinkBlue (www.lablue.com/ilinkblue) 2. Complete and submit the Overpayment Notification Form, available online at www.lablue.com/providers >Resources >Forms. Note: An Overpayment Notification Form is required for BlueCard claims. For full details on overpayments, see the Claims Resolution section of this manual.

Provider Contracting	Provider Contracting supports inquiries related to your provider agreement(s). **Email:** provider.contracting@lablue.com **Phone:** 1-800-716-2299, option 1
Provider Credentialing & Data Management	Credentialing packets and criteria are available on our Provider page at www.lablue.com/providers >Network Enrollment >Join Our Network >Professional Providers >Join Our Networks. The Provider Credentialing & Data Management (PCDM) team handles demographic changes. To change your address, phone number, Tax ID number, etc., please visit www.lablue.com/providers, choose "Resources," then "Forms." Select a link based on the type of change you are making to access the applicable update form. For more information on our credentialing and data management process, including frequently asked questions, visit www.lablue.com/providers, choose "Network Enrollment," then "Join Our Networks" and select "Professional Providers" or "Facilities and Hospitals." For PCDM status inquiries: **Email:** PCDMstatus@lablue.com **Phone:** 1-800-716-2299, option 2, option 1 For recredentialing inquiries: **email:** recredentialing@lablue.com **Phone:** 1-800-716-2299, option 2, option 2
Provider Identity Management Team (PIM)	PIM is a dedicated team that helps establish and manage system access to our secure electronic services, including the setup process for administrative representatives. **Email:** PIMteam@lablue.com **Phone:** 1-800-716-2299, option 5

Provider Page	Our Provider webpage is designed to serve providers' needs. Use this page to help locate important information such as: • Authorizations • Credentialing • Resources • Newsletters • Office of Group Benefits (OGB) • Pharmacy Management • Provider Tools • Quality Blue **Website:** www.lablue.com/providers
Provider Relations	Provider Relations representatives assist network providers and office staff with information about our programs and procedures. Provider Relations representatives do not handle routine claim inquiries and benefit questions. These questions should be directed to our Customer Care Center if they cannot be answered using our other available resources. **Email:** provider.relations@lablue.com

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