

# BLUE REVIEW A Provider Publication

April 2022

# News & Updates

#### **COVID-19 Information for Providers**

Please check the following Blue Cross and Blue Shield of New Mexico (BCBSNM) resources frequently for updates to important information related to COVID-19:

- Provider Information on COVID-19 Coverage
- BCBSNM News and Updates
- BCBSNM COVID-19 Member Website

## Current Procedural Terminology® (CPT) Codes Updated for Prior Authorization

**What's Changing:** BCBSNM is changing prior authorization requirements that may apply for some commercial, Medicaid, and Medicare members to reflect new, replaced or removed codes due to updates from Utilization Management or the American Medical Association (AMA).

**Important Reminder:** Always check eligibility and benefits first through Availity® or your preferred vendor, prior to rendering services. This step will confirm prior authorization requirements and utilization management vendors, if applicable.

Click "Read More" for a summary of changes.

**Read More** 

# **Delivering Quality Care**

## **Free BH Webinars and Continuing Education Credit**

Join us for free one-hour webinars in April and May 2022. Each webinar provides one continuing medical education (CME) credit or continuing education unit (CEU). Registration is required.

- Diabetes and Behavioral Health
- Substance Abuse: Coordinating Care and Improving Follow-Up
- · Differential Diagnoses of Depression

**Read More** 

## **Supporting Mental Health**

More than half of Americans will be diagnosed with a mental illness or disorder at some point in their lives, according to the Centers for Disease Control and Prevention. We encourage providers to talk with our members about mental health and getting help if needed. A depression screening tool can help with this conversation.

Read More

# **Closing Gaps in Colon Care**

Screening is the most effective way to reduce the risk of colorectal cancer, according to the Centers for Disease Control and Prevention (CDC). The CDC and the U.S. Preventive Services Task Force (USPSTF) recommend that everyone 45 to 75 years old get a screening. We encourage you to discuss screening and colon health with our members. We've created resources that may help.

**Read More** 

# **Coding and Claims**

# **Change Coming to FEP Out-of-State Claims Processing June 15**

We will be making changes to how misdirected claims are handled for Federal Employee Program® (FEP®) members. Claims for FEP members **should be filed with the Local Plan** where services are rendered.

Currently, some FEP claims are mistakenly submitted to the member's Home Plan rather than the Local (Host) Plan where services were rendered. In these cases, BCBSNM has manually forwarded the claims to the Host Plan.

### What's Changing:

Effective June 15, 2022, we will no longer forward misdirected claims for FEP members to the Host Plan for processing. We will deny these and instruct you to resubmit the claims to the appropriate Local Plan where the service was rendered.

**More information:** Learn more about the submitting <u>FEP Claims</u>.

## ClaimsXten™ Quarterly Update Reminder

BCBSNM will implement its second quarter code updates for the ClaimsXten auditing tool on or after June 13, 2022.

These Quarterly code updates aren't considered changes to the software version. Code updates may include additions, deletions and revisions to:

- Current Procedural Terminology (CPT<sub>®</sub>) codes
- Healthcare Common Procedure Coding System (HCPCS) codes

Read More

# Transparency In Care — Consolidated Appropriations Act

# It's Time — Verify Your Directory Details

In <u>October</u>, we told you about the Consolidated Appropriations Act (CAA) requirement that certain provider directory information be verified every 90 days. This requirement is effective as of Jan. 1, 2022.

#### What This Means for You

As of Jan. 1, you must:

- Verify your name, address, phone, specialty and digital contact information (website) for our <u>Provider Finder</u> every 90 days, and
- Update your information when it changes, including if you join or leave a network

Under CAA, we're required to remove providers from Provider Finder whose data we're unable to verify.

# Blue Cross Medicare Advantages (Medicare)

## **CMS-Required Training for Dual-Special Needs Plans**

Providers who treat dually-eligible Medicare and Medicaid members are required by the Centers for Medicare and Medicaid Services (CMS) to complete an annual Dual-Special Needs Plan (DSNP) training on DSNP plan benefits and requirements, including coordination of care and Model of Care elements.

**Read More** 

# Blue Cross Community Centennial™ (Medicaid)

## **Required Cultural Competency Training Available Online**

The New Mexico Human Services Department (HSD) requires all providers contracted within a New Mexico Medicaid Network, like Blue Cross Community Centennial, to take annual cultural competency training. This training is intended to include all cultures and not be limited to any particular group and is designed to address the needs of racial, ethnic, and linguistic populations that may experience unequal access to health services.

Read More **P** 

#### **Not Yet Contracted?**

Providers who are participating in commercial BCBSNM products are not automatically participating providers in Blue Cross Community Centennial. If you are interested in becoming a Blue Cross Community Centennial provider, please call 505-837-8800 or 800-567-8540.

# Reminder: Update your Enrollment Information

Due to Centennial Care requirements, all enrollment information (changes to demographics, licensure or certification, provider status, etc.) must be updated on the <a href="MM Medicaid Provider Web Portal">MM Medicaid Provider Web Portal</a> <a href="Medicaid Provider">Medicaid Provider</a> <a href="Medicaid Provider">Web Portal</a> <a href="Medicaid Provider">Medicaid Provider</a> <a href="Medicaid Provider">Web Portal</a> <a href="Medicaid Provider">Medicaid Provider</a> <a href="Medicaid

**BCBSNM** Website

It's important for you to stay informed about news that could affect your practice. BCBSNM offers many ways to stay informed via our website, <a href="https://bcbsnm.com/provider">bcbsnm.com/provider</a>, and our provider newsletter, <a href="https://blue.com/provider">Blue Review</a>. <a href="https://signing.up.is.easy">Signing.up.is.easy</a>.

## **Medical Policy Updates**

Approved new or revised medical policies and their effective dates are usually posted on our website the 1st and 15th of each month. These policies may impact your reimbursement and your patients' benefits. These policies are located under the <a href="Standards & Requirements">Standards & Requirements</a> tab at <a href="bcbsnm.com/provider">bcbsnm.com/provider</a>.

# Clinical Payment and Coding Policies

BCBSNM has adopted additional clinical payment and coding policies. These policies are based on criteria developed by specialized professional societies, national guidelines (e.g. Milliman Care Guidelines (MCG) and the CMS Provider Reimbursement Manual and are not intended to provide billing or coding advice but to serve as a reference for facilities and providers. These policies are located under the Standards & Requirements tab at <a href="mailto:bcbsnm.com/provider">bcbsnm.com/provider</a>.

# Claims Inquiries

Our Provider Service Unit (PSU) handles all provider inquiries about claims status, eligibility, benefits and claims processing for BCBSNM members. For the BCBSNM BlueCard® PSU, call 800-222-7992. For out-of-area claims inquiries, call 888-349-3706.

Network Services Contacts and Related Service Areas

# Verify Your Directory Details & Look for Reminders

Your directory information must be verified every 90 days under a new federal law. It's easy and quick to get it done for all health plans in <a href="Availity" Availity" Availity Ava

# Member Rights and Responsibilities

<u>BCBSNM policies</u> help address the issues of members participating in decision making regarding their treatment; confidentiality of information; treatment of members with dignity, courtesy and a respect for privacy; and members' responsibilities in the practitioner-patient relationship and the health care delivery process.

# bcbsnm.com/provider

- File is in portable document format (PDF). To view this file, you may need to install a PDF reader program. Most PDF readers are a free download. One option is Adobe® Reader® which has a built-in screen reader. Other Adobe accessibility tools and information can be downloaded at <a href="https://www.adobe.com">www.adobe.com</a>
- You are leaving this website/app ("site"). This new site may be offered by a vendor or an independent third party. The site may also contain non-Medicare related information. In addition, some sites may require you to agree to their terms of use and privacy policy.

Availity is a trademark of Availity, L.L.C., a separate company that operates a health information network to provide electronic information exchange services to medical professionals. Availity provides administrative services to BCBSNM.

Blue Cross®, Blue Shield® and the Cross and Shield Symbols are registered service marks of the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield Plans.

Blue Cross and Blue Shield of New Mexico, a Division of Health Care Service Corporation, a Mutual Legal Reserve Company, an Independent Licensee of the Blue Cross and Blue Shield Association

5701 Balloon Fiesta Pkwy NE, Albuquerque, NM 87113 © Copyright 2022 Health Care Service Corporation. All Rights Reserved.

Legal and Privacy | Unsubscribe