

provider update

P=Professional

B=Behavioral Health

F=Facilities

June 2018

Blue Cross & Blue Shield of Rhode Island (BCBSRI) continues partnering with our provider community to address the behavioral health challenges facing our state. The 2014 state-commissioned Truven Analytics Report revealed a lot about the reality of behavioral healthcare in Rhode Island, including the availability of services. We listened, and in February, I shared with you the range of [behavioral health initiatives and programs](#) supported by BCBSRI. Now, I'm pleased to announce how we're improving access to behavioral healthcare services for our members.

Starting August 1, 2018, **BCBSRI will no longer require utilization review (prior approval or continued stay review) for inpatient and intermediate levels of behavioral health services that are in-network.** Once in effect, the requirement for prior approval will be replaced by a requirement by the admitting provider to notify of admission and discharge. It's one way we're offering providers more flexibility when referring members to inpatient care or more intensive programs for behavioral health services.

Helping make this change even simpler is ProviderConnect—a new online portal administered by our behavioral healthcare partner, Beacon Health Options. Admitting providers should use ProviderConnect to notify BCBSRI of inpatient or intermediate levels of care. Beginning June 1, 2018, providers can register for access to the ProviderConnect portal.

Additionally, BCBSRI and Beacon Health Options will offer providers webinars on how to use the new portal.

Webinars are scheduled for:

- Tuesday, July 10 at 11 a.m.
- Tuesday, July 24 at 2 p.m.

Please note that not all levels of care will require the use of ProviderConnect to notify BCBSRI of inpatient or intermediary behavioral health services. Providers should continue using the current fax process when referring members for the following treatments:

- Applied behavior analysis (ABA)
- Ambulatory detoxification
- HealthPath
- Transcranial magnetic stimulation (TMS)

BCBSRI is committed to improving access to behavioral healthcare for our members, while supporting providers with the tools they need to facilitate the highest quality treatment possible. I encourage you to [visit Beacon Health Options' website](#) this June and register for access to the ProviderConnect portal. Their website also offers tutorials and basic guides on how to navigate ProviderConnect. I also encourage you to attend a scheduled training this July to become familiar with this new resource.

If you have any questions about this update or BCBSRI's behavioral health programs, please email ProviderRelations@bcbsri.org.

Thank you.

Dr. Gus Manocchia
*Executive Vice President
and Chief Medical Officer*



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BCBSRI Update

PBF We're upgrading our provider call center system!

Last fall, BCBSRI's Physician and Provider Service Center began upgrading its phone system technology to improve the service we offer providers. We're excited to announce that these upgrades will launch later this month. When reaching out to BCBSRI's Physician and Provider Service Center, our Interactive Voice Response (IVR) system will offer the following improvements to the provider experience:

- Upfront caller identification with streamlined options and quicker routing to an agent
- A more intuitive overall navigation menu with more flexible self-service options
- Improved claims inquiry functions

Our Physician and Provider Service Center will phase in this new technology between **June 18 and June 21, 2018**. You are still able to use BCBSRI's online Provider Portal during this time. To view instructions on how to use the IVR system, please [click here](#).

PBF Your Blue Stores will offer fall prevention classes

Your Blue Stores will offer fall prevention classes to help your patients maintain their personal independence by reducing serious injury. Falls are the second cause of injury-related deaths, and 76% of falls result in a hospital admission. Additionally, with six out of every 10 falls occurring at home, it's even more important for patients to learn the skills needed to prevent a serious injury and maintain their independence.

All three Your Blue Store locations will offer the interactive class *Keeping Your Independence through Fall Prevention*. The class encourages behavior changes by identifying basic, proactive strategies to reduce the risk of falling. Feedback from initial participants has been excellent, specifically on the easy-to-follow educational handouts and interactive format.

Fall prevention classes are scheduled for the following dates, times, and Your Blue Store locations:

July 19 at 2 p.m.—300 Quaker Lane, Warwick, RI

August 15 at 2 p.m.—622 George Washington Highway, Lincoln, RI

September 12 at 10 a.m.—71 Highland Avenue, East Providence, RI

Your patients can RSVP online at bcbsri.com/yourbluestore. Once on the home page, click on the Events icon, then select which location to take a class and then RSVP. Patients can call (401) 459-2273 (CARE) to speak with a healthcare professional or to ask questions about these classes.

PBF Fax and email submission process for grievances and appeals

As a reminder, all submissions to the Grievance and Appeals Unit can be sent by fax or email.

- Commercial member complaints and appeals can be faxed to (401) 459-5005.
- Medicare member complaints and appeals can be faxed to (401) 459-5668.
- All provider complaints and appeals can be sent by encrypted email to GAU_Complaints_Appeals@bcbsri.org.

BCBSRI will continue to accept paper submissions, but we strongly encourage your office to utilize fax or email as those methods are more efficient. If you have any questions, please call the Physician & Provider Service Center at (401) 274-4848 or 1-800-230-9050 for out-of-state callers. We appreciate your support and participation as we work to streamline our process and improve our service.

PBF Important: verify your practice information!

BCBSRI regularly conducts quarterly fax-based validation and attestation of provider practice information displayed within our [Find a Doctor tool](#). We contact provider offices directly, via fax, to ensure this information is accurate and up-to-date.

The Centers for Medicare & Medicaid Services (CMS) requires providers to note whether the location included is the same as where a patient is able to make an appointment. CMS also requires providers to note whether they are accepting new patients.

Once your office has verified your information, please check the "attestation" box and fax it back to BCBSRI, as soon as possible. Please note that even if your information is presently accurate and not in need of updates, your office is still expected to verify your information, check the attestation box, and fax the form back to BCBSRI.

If you have questions about these verification efforts, please email ProviderRelations@bcbsri.org.

BCBSRI Update



Rhode Island's Blue Distinction Centers offer top-quality, patient-focused care

As healthcare continues to evolve, patients want reassurance that they are getting the best care available. It can sometimes be difficult to know where to get high-quality care that delivers the best possible health outcomes. Fortunately, we have top-notch healthcare facilities right here in Rhode Island, known as Blue Distinction Centers.

Blue Distinction Centers are nationally designated hospitals that use objective measures and input from the medical community to demonstrate improved patient safety and health outcomes. These designated centers are a part of the largest national network of value-based care programs, known as Blue Distinction Total Care®.

Blue Distinction Centers emphasize prevention and wellness, as well as disease management and coordinated care to keep patients healthier and less likely to be readmitted to a hospital. These hospitals also prioritize quality of services, rather than the number of services provided. Nationally, these Blue Distinction Centers have achieved comparatively better results for patients, including:

- 10% fewer emergency department visits
- 7% better HbA1c testing for diabetes patients
- 5% better adherence to medications for patients with cardiovascular disease
- 15% decline in hospitalizations year-over-year

Blue Distinction Total Care also decreased the cost trend by 35% compared to non-Total Care providers. These results represent significant savings for Blue Cross and Blue Shield customers, along with the broader healthcare system. The Blue Cross Blue Shield Association recently announced that Total Care providers, hospitals, and clinical care teams are outperforming non-Total Care providers at a rate of 96 percent of nationally consistent industry quality measures.

Here are the Rhode Island hospitals that are identified as Blue Distinction Centers:

- **Maternity Care:**
 - Kent County Hospital
 - South County Hospital
 - Women & Infants Hospital
- **Cardiac Care:**
 - Rhode Island Hospital
- **Knee & Hip Replacement:**
 - Newport Hospital
 - Our Lady of Fatima Hospital
 - Rhode Island Hospital
 - Roger Williams Medical Center
 - South County Hospital
 - The Miriam Hospital
- **Spine Surgery:**
 - Our Lady of Fatima Hospital
 - Rhode Island Hospital
 - Roger Williams Medical Center
- **Bariatric Surgery – Comprehensive Center:**
 - Roger Williams Medical Center

Notably, South County Hospital was designated as a Blue Distinction Center for adhering to cost measures that address consumers' need for affordable healthcare. Each Blue Distinction Center's facility cost of care is evaluated using data from its local Blue plan.

To learn more about Blue Distinction Centers, please [click here](#).

PBF Hints for HEDIS® (and more)

As part of our ongoing efforts to provide the highest quality healthcare to our members, BCBSRI reviews data from the Healthcare Effectiveness Data and Information Set (HEDIS), CMS Stars, Consumer Assessment of Healthcare Providers and Systems, Medicare Health Outcomes Survey, and internal resources. This helps us identify opportunities to enhance clinical care for your patients, our members. Hints for HEDIS (and more) provides guidance and resources to help address these opportunities. If you have any questions, comments, or ideas regarding any of our quality or clinical initiatives, please contact Courtney Reger, RN, BSN, manager, quality at (401) 459-2763, or email courtney.reger@bcbsri.org.

CPT® Category II Codes for asthma

CPT Category II Codes can close gaps in care for your patients, as set forth by the National Committee for Quality Assurance. While CPT Category II codes are not reimbursed by BCBSRI, submission of these codes will greatly reduce the HEDIS medical record review burden on your practice by closing gaps in care through claims data. We have attached a list of relevant CPT Category II Codes. Effective immediately, these codes can be submitted and used for claims with older dates of service. If you have any questions, please contact your provider relations representative or email ProviderRelations@bcbsri.org.

Resources for members with asthma and allergies

For those with asthma, allergies, or both, summer can be a difficult time, especially when dealing with triggers like humidity, mold, spores, animals, and insects. Having conversations with your patients who have asthma or allergies about condition management can be beneficial. Here are topics and resources you can discuss with your patients:

- Review triggers, including newly identified ones, and plan for mitigating their impact.
- Review or create a personal asthma action plan.
- Remind patients to refill seasonal control and rescue medications.
- Encourage members to contact BCBSRI customer service to learn more about coverage for spirometers.

In addition to these helpful suggestions, BCBSRI also offers a disease management program for members with asthma. We also recommend the Draw a Breath program at Hasbro Children's Hospital for pediatric patients and their families. Please read below for information on both of these resources.

BCBSRI's Asthma Disease Management program

BCBSRI offers an asthma management program for adults and children with asthma. Interventions and notifications of program eligibility are based on risk stratification. Members identified as low-risk receive educational materials in the mail to introduce them to the program.

Members identified as high-risk can participate in telephonic health coaching with RNs, who may be certified Asthma Educators and/or have clinical/educational experience in asthma management. High-risk members belonging to a patient-centered medical home will be notified to contact their PCP's nurse case manager for assistance with their asthma management.

If you treat BCBSRI members who could benefit from the Asthma Disease Management program, please call BCBSRI's Triage Line at (401) 459-2273 (CARE), or email triage_group@bcbsri.org.

Draw a Breath program

Based at Hasbro Children’s Hospital, the Draw a Breath program provides education for children and their parents on effectively managing asthma. As the largest asthma education program in the state, the program is offered in English and Spanish.

If you have patients who are asthmatic and are looking for further education on managing their condition, please direct them to call the Draw a Breath program directly at (401) 444-8340.

HEDIS measure: Medication Management for People with Asthma

The table below contains practice tips for the HEDIS measure Medication Management for People with Asthma:

<i>Measure</i>	<i>Population: Numerator and denominator</i>	<i>Tips for success</i>
Medication Management for People with Asthma	<p>Denominator: Patients 5-64 years of age with persistent asthma.</p> <p>- Two rates are reported -</p> <p>Numerator: The number of patients who remained on an asthma controller medication for:</p> <ul style="list-style-type: none"> • At least 75% of the treatment period • At least 50% of the treatment period <hr/> <p>Exclusions: Diagnosis of COPD, emphysema, obstructive chronic bronchitis, chronic respiratory conditions due to fumes/vapors, cystic fibrosis, or acute respiratory failure any time during the patient’s history through the end of the measurement year.</p>	<ul style="list-style-type: none"> • Help members identify common allergies that could trigger asthma symptoms and recommend ways to avoid exposure to triggers. • Educate members about medications that can cause or worsen asthma symptoms. • Help members develop an action plan to identify when they are doing well and when they need help. • Encourage members to keep a journal of their medications and asthma symptoms to review during appointments. This can help determine if medication adjustments are needed.

Asthma Controller Medications

<i>Description</i>	<i>Prescription</i>	
Antiasthmatic combinations	• Dyphylline-guaifenesin	• Guaifenesin-theophylline
Antibody inhibitors	• Omalizumab	
Inhaled steroid combinations	• Budesonide-formoterol • Fluticasone-salmeterol	• Fluticasone-vilanterol • Mometasone-formoterol
Inhaled corticosteroids	• Beclomethasone • Budesonide • Ciclesonide	• Flunisolide • Fluticasone CFC free • Mometasone
Leukotriene modifiers	• Montelukast • Zafirlukast	• Zileuton
Mast cell stabilizers	• Cromolyn	
Methylxanthines	• Aminophylline • Dyphylline	• Theophylline

Asthma Reliever Medications

<i>Description</i>	<i>Prescription</i>
Short-acting, inhaled beta-2 agonists	<ul style="list-style-type: none"> • Albuterol • Levalbuterol <ul style="list-style-type: none"> • Pirbuterol

HEDIS measure: Use of Spirometry Testing in the Assessment and Diagnosis of COPD

Chronic Obstructive Pulmonary Disease (COPD) is a lung disease that causes coughing, wheezing, and shortness of breath, among other uncomfortable symptoms. COPD is a major cause of disability and a leading cause of death in the United States. Spirometry is an inexpensive, simple test that can diagnose and help distinguish COPD from asthma, enabling providers to determine an appropriate treatment regimen.

Below are practice tips for the use of Spirometry testing as a HEDIS measure:

<i>Measure</i>	<i>Population: Numerator and denominator</i>	<i>Tips for success</i>								
Use of Spirometry Testing in the Assessment and Diagnosis of COPD	<p>Denominator: Members aged 40 and older with a new diagnosis of COPD or newly active COPD</p> <p>Numerator: At least one claim/encounter for spirometry in the two years before the diagnosis date through six months after the diagnosis date</p> <hr/> <p>Exclusions: Members in hospice</p>	<ul style="list-style-type: none"> • Encourage members to wear loose clothing that won't interfere with their ability to take a deep breath. • Before they arrive, instruct members to avoid eating a large meal before their test, so it will be easier to breathe. • The following CPT codes for spirometry make a member compliant with HEDIS. Please make sure to use the most clinically appropriate code: <table style="margin-left: 20px; border: none;"> <tr> <td>94010</td> <td>94060</td> </tr> <tr> <td>94014</td> <td>94070</td> </tr> <tr> <td>94015</td> <td>94375</td> </tr> <tr> <td>94016</td> <td>94620</td> </tr> </table> 	94010	94060	94014	94070	94015	94375	94016	94620
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PBF Updates to utilization review for behavioral health

As mentioned in Dr. Manocchia's front-page column, effective August 1, 2018, **BCBSRI will no longer require utilization review (prior approval or continued stay reviews) for inpatient and intermediate levels of behavioral health services that are in-network.** This policy change applies to all Commercial and Medicare Advantage products, with the exception of the Federal Employee Program, or FEP.

In place of a utilization review, admitting providers will be required to submit a notification of admission and discharge for inpatient and intermediary levels of treatment occurring in-network. Notifications should be submitted through a new, online portal called ProviderConnect. The ProviderConnect portal is administered through BCBSRI's behavioral healthcare partner, Beacon Health Options. As of June 1, 2018, providers are able to register for the portal.

Beacon Health Options will also offer web-based trainings on how to use the ProviderConnect portal effectively. Trainings are offered in July at the following times:

- Tuesday, July 10 at 11 a.m.
- Tuesday, July 24 at 2 p.m.

You can also [click here](#) to visit Beacon Health Options' website for more information on ProviderConnect, including basic tutorials and guides.

Providers will be required to submit a notification of admission and a notification of discharge for inpatient and intermediate behavioral healthcare services. This required process of notification will replace the need for a utilization review.

Updates to Beacon Health Option's medical necessity criteria

As a certified Utilization Review Organization in the state of Rhode Island, Beacon Health Options conducts utilization reviews of behavioral health services for BCBSRI. On an annual basis, Beacon Health Options' Level of Care Committee convenes to review and update the medical necessity criteria on which coverage determinations are based. The 2018 criteria can be found [here](#).

Provider comments, observations, recommendations, and suggestions regarding this material are very important to BCBSRI and Beacon Health Options. We invite you to share with us your written feedback and recommendations for consideration of the Level of Care Criteria used by BCBSRI. Please send any suggestions and comments within 60 days to BCBSRI's Medical Policy area.

Finalized medical necessity criteria will be in effect on August 1, 2018.



Pharmacy

PBF Updated drug policies for BlueCHIP for Medicare

As of June 1, 2018, the following drugs are only applicable to BlueCHIP for Medicare Advantage:

- Benlysta (Belimumab)
- Botulinum Toxins Injections
- Brineura
- Exondys (Eteplirsen) for Duchenne Muscular Dystrophy
- Infused Drugs for Multiple Sclerosis (Lemtrada and Ocrevus)
- Injectable Agents for Asthma and Chronic Idiopathic Urticaria – Xolair, Cinqair, Fasenna, Nucala
- Krystexxa (Pegloticase)
- Kymriah
- Makena
- Parsabiv (etelcalcetide)
- Probuphine
- Prolia and Xgeva (Denosumab)
- Provenge (Sipuleucel-T) – Update effective 7/1/2018
- Radicava
- Soliris
- Sprinrava
- Stelara (Ustekinumab) Intravenous use for Crohn's Disease
- Xeomin
- Xiaflex (Clostridial Collagenase)
- Yescarta

To read the Prior Authorization of Drugs policy for Commercial products, click [here](#).

Claims

PF Filing claims containing modifiers for multiple sites of service

BCBSRI accepts claims that use modifiers to identify multiple sites of service. When submitting a claim that uses modifiers to identify multiple sites of service, we would like to remind providers to file these modifiers on separate claim lines.

Doing this helps BCBSRI interpret and process your claim correctly.

PBF Medical records submissions

Effective immediately, please discontinue submitting medical records utilizing the *Medical Records Cover Sheet*. In order to provide more efficient processing of your medical record submissions, please keep in mind the following:

- If you have received a letter from BCBSRI requesting medical records, please attach the letter you received when submitting the associated medical records.
- If you have not received a letter, please utilize the [Physician/Provider Claim Adjustment Request Form](#) and check the space marked "Other." This indicates medical records submission per BCBSRI request. Please be sure to provide the claim identification number that is applicable to the medical record being submitted.

If you have any questions regarding this or other submission processes, please email ProviderRelations@bcbsri.org.

Contracting & Credentialing

PBF Laboratory changes in BCBSRI's network

As a BCBSRI-contracted provider, it is your obligation to coordinate member care with contracted, in-network providers. This includes services, such as durable medical equipment, radiology, behavioral health providers, and clinical laboratory and pathology services.

We want to keep you up-to-date on all BCBSRI in-network developments. As such, the following laboratories **do not** participate within BCBSRI's network:

- Lehigh Valley Toxicology
- Mercy Diagnostics
- Total Toxicology
- U.S. Lab & Radiology, Inc.
- Quest
- Millennium Laboratories, Inc.

Before establishing a referral relationship, **please confirm that the provider you are referring members to is contracted within BCBSRI's network.** You can confirm participation by checking the status of providers on BCBSRI's [Find a Doctor tool](#).

Policies

PF Policies recently reviewed for annual update

The following policies were recently reviewed for annual updates:

- Ambulance Air and Water Transport
- Anastomosis of Extracranial-Intracranial Arteries
- Artificial Intervertebral Disc Insertion Lumbar Spine
- Computer-Assisted Musculoskeletal Surgical Navigational Orthopedic Procedure
- Human Leukocyte Antigen (HLA) Testing Mandate
- Image Guided Minimally Invasive Decompression for Spinal Stenosis
- Long Term
- Medical Necessity
- Multimarker Serum Markers Related to Ovarian Cancer
- Orally Administered Anticancer Medication Mandate
- Peripheral Artery Disease Rehabilitation
- Surgical Ventricular Restoration
- Urinary Tumor Markers for Bladder Cancer

To view the full text of these policies, please click [here](#).

For your review, we also post monthly drafts of medical policies that are in the process of being created or reassessed. As a reminder, you can provide comments on draft policies for up to 30 days. Draft policies are located on the Policies page in the Provider section of [bcbsri.com](#). Once there, click on the Medical and Payment icon to view the relevant policy. From there, use drop-down box to sort policies by draft.

PF New policies

Please be advised that the following new policies have been created:

- Expanded Molecular Panel Testing of Cancers to Identify Targeted Therapies
- Luxturna
- Medicare Diabetes Prevention Program
- Proprietary Laboratory Analyses – Effective July 1, 2018

To review the full text of each policy, please visit the [Policies page](#), which is located on the Provider section of bcbsri.com.

PF New submission requirements for claims using Modifier 59 and X {EPSU} modifiers

BCBSRI follows the Medicare National Correct Coding Initiative (NCCI) edits to ensure that all claims are coded based on recognized industry standard correct coding guidelines. Starting August 15, 2018, BCBSRI will require claims review for select procedure codes submitted with Modifier 59, or XE, XP, XS, XU (X {EPSU}) and are listed in the [Modifier 59, XE, XP, XS, XU Guidelines policy](#). Please review the full text of the policy and be advised that procedure codes requiring documentation will be updated as needed. Claims must be filed on paper with supporting documentation (e.g., operative/medical notes) in accordance with the policy and it is recommended that providers verify the existence of an NCCI edit prior to claim submission. When supported by medical record documentation the appropriate non-site specific NCCI modifiers should be appended to the secondary, additional or lesser service in the code pair, which is the column 2 code in the code pair.

Claims Submission claim tips:

- Submit claims on the CMS-1500 claim form with pertinent supporting documentation.
- Please highlight or otherwise indicate the part of the medical records that support the use of these modifiers.
- Mail completed CMS-1500 claim form with pertinent supporting documentation to:

Blue Cross & Blue Shield of Rhode Island
Claims Department
500 Exchange Street
Providence, RI 02903

Very Important: claims filed electronically or claims filed without supporting documentation will be denied by our claims processing system.

- Denials for no supporting documentation for Modifier 59 or X {EPSU} modifiers should be resubmitted as an adjustment using the [Physician/Provider Claim Adjustment Request Form](#) along with supporting documentation.
- Please note, if the CMS-1500 claim form was already submitted on paper it is not necessary to submit a copy of it with the Physician/Provider Claim Adjustment Request Form. However, the claim number must be included on the form.

Please read [BCBSRI's Claim filing information](#) for additional claims submission tips.

Claims and medical records will be reviewed in their entirety by a coding professional for compliance with Current Procedural Terminology (CPT), Healthcare Common Procedure Coding System (HCPCS), International Statistical Classification of Diseases and Related Health Problems, 10th revision Clinical Modification (ICD-10-CM), CMS NCCI manual, and BCBSRI policies. Providers are reminded to maintain current copies of coding reference books or current versions of coding software in your office along with the most recent web version of the CMS NCCI Manual and tools available.

Policies

Tools such as Optum Encoder Pro will be utilized. Encoder Pro is an online code look-up software that offers detailed search capabilities of reference material and lay descriptions in real-time for CPT, ICD-10-CM/PCS, ICD-9-CM, and HCPCS Level II. If applicable, the claim may be reviewed for medical necessity by an appropriate medical professional. BCBSRI reserves the right to determine if the coding filed is appropriate and if not, providers will be notified through their remittance advice of the determination. If a provider disagrees with BCBSRI's decision regarding the denial of a claim the provider can file a complaint. To do so please submit a written statement of the concern along with the following information and/or documentation normally required for a review:

- Written explanation supporting the procedures submitted
- And/or documentation from a recognized authoritative source that supports your position on the procedure codes submitted

Services denied based on NCCI code pair edits may not be billed to BCBSRI members as they are based on incorrect coding.

PF BlueCHIP for Medicare national and local coverage determinations policy

BCBSRI must follow CMS guidelines for national coverage determinations (NCD) or local coverage determinations (LCD). Therefore, policies for BlueCHIP for Medicare may differ from policies for Commercial products. In some instances, benefits for BlueCHIP for Medicare may be greater than what is allowed by CMS.

In the absence of an applicable NCD, LCD, or other CMS-published guidance, BCBSRI will apply policy determinations developed using peer-reviewed scientific evidence. BCBSRI will continually review NCD and LCD updates and implement appropriate policy changes.

Due to the ongoing effort to follow CMS NCDs and LCDs, many BCBSRI policies are now applicable to Commercial products only. In these instances, please refer to BlueCHIP for Medicare's National and Local Coverage Determinations policy for further information on BlueCHIP for Medicare coverage.



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