Kansas Health Data Systems (KHDS) was moved under the Institutional Relations Department at Blue Cross and Blue Shield of Kansas (BCBSKS) in June 2011. The move was made to bring more cohesion between the two departments and their work with the hospitals that contract with BCBSKS; KHDS with the processing of hospital abstracts and Institutional Relations (IR) functioning as a liaison between the hospital providers, managing their contracts, and providing training and communication to the facilities.

“KHDS is honored to have found a home under the Institutional Relations umbrella; this is a very good fit for our unit,” says Deanna Karle, KHDS Manager. “We look forward to supplementing the great service IR has always provided and encourage facilities to contact us for specialized reporting requests related to the KHDS abstract or BCBSKS claims.”

KHDS is responsible for the processing of medical record abstracts and providing facility education to efficiently complete abstracts for all contracting hospitals in Kansas who submit inpatient claims. An abstract is a separate document, which must be present for BCBSKS’ inpatient claims to process completely. KHDS is a vital area of BCBSKS in which DRG validations and reimbursement audits have been made possible by efficiently transferring data through internally-developed systems. This type of re-

Deanna Karle, KHDS Manager

Todd Colglazier, KHDS Health Information Systems Representative
porting procedure was originally established in 1975 after a computerized shift in data submission and new demands for auditing, created a need for KHDS to exist. Many changes have occurred over the years, but the health data unit has remained a vital area of BCBSKS in which MS-DRG validations and reimbursement audits have been made possible by efficiently transferring data through internally developed systems. Over the past couple of years the national initiative to change from ICD-9 to ICD-10 code sets has been a major focus for KHDS. Due to the constant exposure to medical coding and the nature of abstracting, the ICD-9 (and soon ICD-10) code set(s) maintenance and review is managed by KHDS for BCBSKS.

Family Emergency Plan

Have you thought about your family's emergency plan lately? Listed below are some things to discuss with your family so that you and your family are ready in case of an emergency:

- How will your contact one another, how you will get back together and what you will do in case of an emergency?
- Identify an out-of-town contact. An out-of-town contact may be in a better position to communicate among separated family members.
- Identify places where your family will meet, both in and out of your immediate neighborhood.
- Designate an emergency contact person and be sure every family member knows the phone number and has a cell phone, coins, or a prepaid phone card to call the emergency contact. If you have a cell phone, program that person(s) as "ICE" (In Case of Emergency) in your phone.
- Inquire about emergency plans at places where your family spends time (i.e., work, daycare, school). If no plans exist, consider volunteering to help create one.
- Notify caregivers and babysitters about your plan and make plans for your pets.

Just these few steps can assist you and your family in being prepared in case of an emergency.

Source: ready.gov

Volume 4 Number 3 2011
Blue Cross and Blue Shield of Kansas is proud to offer our contracting providers improved Web self-service functionality and usability by partnering with the Availity® Health Information Network. In 2012, contracting providers can use the Availity portal for the following transactions for Blue Cross and Blue Shield members in Kansas:

- Eligibility and benefits verification
- Claim status inquiries

Providers who require other online services, such as pre-certification, will be re-directed to the secure section of the BCBSKS Web site through a single sign-on process.

Who is Availity?
Availity offers a multi-payer portal that gives physicians, hospitals and other health care providers secure access to multiple payers’ information through a single sign-on. Availity offers a variety of business and clinical solutions to help providers reduce administrative costs by eliminating paperwork and phone calls. Availity is one of the nation’s largest electronic health information networks, processing more than a billion transactions each year.

Benefits of Availity:
- No Charge - Health plan transactions are available at no charge to providers.
- Access - Reach Availity 24 hours a day from any computer with Internet access.
- Consistency - Receive responses from multiple payers in the same format and screen layout.

Support - Get help from expert client service representatives who understand your workflow.

Security - Trust the secure movement of confidential health care information across the Availity network.

Compliance - Adhere to all critical industry standards, including the Health Insurance Portability and Accountability Act (HIPAA).

Training - Free live and pre-recorded Web-based training seminars are available to your staff members, along with online demonstrations, frequently asked questions and comprehensive health topics.

AVAILITY DEMO
For more information and to take a test drive, go to www.availity.com to view the online demonstrations. We hope you’ll see that Availity is as familiar and intuitive as any of your favorite web sites, making it easy to streamline workflow, reduce costs, and improve patient relationships.
TriWest Offering Online Claims Correspondence/Webmail

Available from the secure provider portal at www.triwest.com/provider, registered providers can electronically submit claims-specific issues and other general website inquiries directly to TriWest Healthcare Alliance Corp. (TriWest) for resolution of TRICARE® West Region claims issues and inquiries with online claims correspondence/Webmail.

For online claims correspondence, registered users are prompted to enter claims-related information (e.g., a beneficiary’s Social Security Number and/or claims number). Users also can electronically upload supporting documentation, if required, to process their claims inquiry, appeal or review.

Webmail allows users to submit inquiries regarding general secure website topics (e.g., User Administration, Personal Profile, and Eligibility) that don’t necessarily require an immediate resolution.

To learn how to correspond with TriWest regarding claims issues/inquiries and your secure account at www.triwest.com, view the Online Claims Correspondence and Webmail website demonstration.

To take advantage of these exciting new time-saving features, make sure you are registered for the secure provider portal at www.triwest.com/provider/registration. Registered users can also take advantage of these already established features:

- Verify patient eligibility
- Research covered benefits and check referral/authorization and medical review requirements for specific codes
- Submit referrals/authorizations online and check their status regardless of how the request was submitted
- Submit claims online and check claim status regardless of how the claim was submitted
- Download remittance advices and claims status reports
- Submit corrected claims
Coordination of Benefits (COB) Claims and Patient Liability

Coordination of benefits (COB) refers to how the Blue System ensures that members receive full benefits and prevent double payment for services when a member has coverage from two or more sources. The member’s contract language explains the order for which entity has primary responsibility for payment and which entity has secondary responsibility for payment.

When you see any patients who you are aware might have other health insurance coverage (i.e. Medicare, other Blue Plans or other commercial carriers), please keep in mind the following as you submit their claims:

- If Blue Cross and Blue Shield of Kansas or any other Blue Plan is the primary payer, submit other carrier’s name and address with the claim to BCBSKS. If you do not include the COB information with the claim, the member’s Blue Plan will have to investigate the claim. This investigation could delay your payment or result in a post-payment adjustment, which may increase the amount of time for your bookkeeping.

- Carefully review the payment information from all payers involved on the remittance advice before balance billing the patient for any potential liability. The information listed on the BCBSKS’ remittance advice as “patient liability” might be different from the actual amount the patient owes you, due to the combination of the primary insurer payment and your negotiated amount with BCBSKS.

If you have any questions regarding claims processing, please contact BCBSKS’ COB Department at 1-800-430-1274 or 785-291-4013
Resource Blue adds unique new partner

CorCell, the umbilical cord blood stem cell preservation company focused on bringing the life-saving potential of stem cells to families, is the newest discount vendor to be added to Resource Blue, BCBSKS’ member partner discounts.

Under this partnership, members will receive preferred pricing on CorCell’s all-inclusive enrollment fee which includes: cord blood collection kit, cord blood testing and processing, private medical courier and the first year of storage.

Collected immediately after birth of a baby, stem cells from the cord blood are preserved and stored for future medical benefits should the child ever need a stem cell transplant. It also is possible for a sibling, parent or grandparent to benefit from the stem cells as well.

Umbilical cord blood contains stem cells which can be used to treat genetic disorders as well as 75 major diseases including leukemia, anemia, sickle cell, non-Hodgkin’s lymphoma, metabolic blood disorders and immune deficiencies. Ongoing medical research is being conducted to determine how stem cells can be used to combat other serious diseases for which there is currently no cure.

Umbilical cord blood stem cells are not embryonic stem cells. CorCell does not bank embryonic stem cells.

Visit www.bcbsks.com for more information on the CorCell offer to BCBSKS members and to learn more about other Resource Blue discount provided to Blue Cross and Blue Shield of Kansas members.

Effective January 1, 2012

You **MUST** be ready to send and receive HIPAA 5010 transactions

All electronic transactions are impacted, i.e. Claims – 837, Remittance – 835, Eligibility & Claims Status 27X, ......

- BCBSKS is now accepting production HIPAA 5010 transactions.
- 277CA – New Claims Acknowledgement replaces Claims Confirmation Report.
- For more information visit the HIPAA 5010 information on the BCBSKS Web site visit EDI

What is your status?
BCBSKS departments obtain and retain accreditations

Three departments within medical affairs have achieved or maintained the prestigious Utilization Review Accreditation Commission (URAC) accreditation, according to Michael D. Atwood, M.D., chief medical officer. The care management and case management departments are URAC certified for the first time, while the precertification department, URAC-accredited since 1992, has retained its accreditation. “The employees of Blue Cross and Blue Shield of Kansas have long taken pride in knowing that we provide our members and contracting providers with high quality programs and services, and these accreditations validate that,” says Dr. Atwood. “URAC accreditations are a significant achievement and position Blue Cross well for continued success in the new health care marketplace. “Each and every employee who works in these departments and those who were involved in the accreditation process should be proud of their efforts,” he says. URAC accreditation is a nationally-recognized quality seal. “Displaying the URAC seal is another way to let members and employer groups know that BCBSKS offers quality services and is providing quality services to members,” says Dana Hammontree, manager of quality improvement and care management.

As part of the application requirements, each department had to answer general and specific questions. The overall application asked general information questions about the company’s organizational structure, board of directors and enrollment counts. In addition to written responses to the questions, the pre-certiﬁcation, care management and case management departments were subject to an onsite URAC review.

Throughout the course of the onsite review, the URAC representative:

- Reviewed staff personnel files.
- Toured the three departments, observed the staff in action as well as interviewed some staff members.
- Interviewed other corporate employees involved in data security and our corporate compliance program.
- Reviewed documentation from randomly selected files.

Congratulations to BCBSKS’ Medical Affairs Division on these accomplishments!

Blue Cross and Blue Shield of Kansas Facts……..

- Classification…… Mutual insurance company
- Number of Employees…..1429 (1320 in Topeka; 109 outside of Topeka)
- Provider Network…..In 2011, 96% of all providers in the BCBSKS service area, including 99% of all medical doctors and 100% of all medical facilities.
- 2010 health claims processed….. 16,393,600
- 2010 health claims paid…….$2,053,968,001
Kansas Fitness Events

Are you interested in participating in a local fitness event? Take a look at what’s coming up in Kansas this fall.

Oct. 22 – Salina Animal Shelter’s 5K Wagathon, Salina
Oct. 22 – Neewollah 5K, 10K and 1 mile fun run, Independence
Oct. 23 – K-State Homecoming 5K, Manhattan
Oct. 23 - Make Strides Against Breast Cancer 5K, Topeka
Oct. 29 – PIE Spooktacular 5K/1mile, El Dorado
Oct. 29 – Pumpkin Paradise Eskridge Fall Festival 5K, Eskridge
Oct. 30 – Boo! Run and Trunk or Treat, Lawrence
Nov. 5 – Tails on the Trail 5K, Topeka
Nov. 6 – New Balance Girls on the Run 5K, Wichita
Nov. 12 – Ark City FFA Agriculture and Autism 5K, Arkansas City
Nov. 19 – 36th Annual Turkey Trot, Wichita
Nov. 20 – Gobbler Grind Marathon (1/2 marathon & 5K), Overland Park, KS
Nov. 24 – Thanksgiving Day 5K Run and Family Stroll, Overland Park, KS
Nov. 24 – Say Grace Thanksgiving Day Race, Wichita
Nov. 26 – Trail Stomp, Plaine
Nov. 26 – Annual Miracle on KS Ave Rescue Run 5K, Topeka

Visit Sunflower Striders, Runner’s World and Run Wichita for registration details.

KEEPING YOUR FOOD SAFE

According to the U.S. Centers for Disease Control and Prevention, perishable foods kept between 40 degrees F (4C) and 140 degrees F (60C) for more than two hours are no longer safe to eat. Although 45 percent of the packed lunches included an ice pack and 12 percent were kept in refrigerators, nearly all of the perishable foods were in the danger zone. Keep these food safety tips in mind when preparing sack lunches.

Include frozen gel pack in the lunch bag. No matter what sort of lunch bag or box you use, you should definitely place some kind of ice pack (possibly two) in it to keep the food inside cold. Small, frozen gel packs are perfect for this task. Be sure to include this if perishable foods such as cold cuts, tuna, or mayonnaise-based items are in the lunch.

Keep hot foods hot. To keep hot foods hot, use a thermos. Did you know that you will get the most out of your thermos if you fill it with boiling water and let it stand for a few minutes before emptying it and putting in your favorite hot soup, chili, etc?

Source: USDA, CDC, WebMD®