



Professional Provider Report

A newsletter for professional providers and their staff members

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What's Inside

- Highmark expands prior authorization requirements..... 1
- Increased Call Volume, Hold Times and Self Service Options 2
- Pharmaceutical Formulary Update 3
- Attention Prescriber - New Program Allows for Prior-Authorization Expiration Notification 4
- Clarification of COVID-19 Testing 4
- COVID-19 Billing and Reimbursement 5
- Drug Cost Transparency Tools Available for Boeing Group Members 6
- Uploading Records via Availity 7
- Medical Record Retrieval Coordinator for Affordable Care Act Programs..... 8
- Action Required - Provider Business Arrangements 9
- Avoidance of Antibiotics..... 10
- CDC Offering Free Continuing Education Credits 10
- QBRP Eligibility Reminder..... 10
- Modifiers for Diabetic Equipment and Supplies.....11
- BCBSKS Retirements, Promotions and New Staff11
- Web Changes - Medical Policy..... 12

Highmark Expands Prior Authorization Requirements for Outpatient Services

Effective November 1, 2020, Highmark is expanding their prior authorization requirements for outpatient services to include those services provided by out-of-area providers participating with their local Blue Plan. This will ensure that the care their members receive while living and traveling outside of the Highmark service area is medically necessary and managed as consistently as it is within their service area.

- As of 11/1/20 prior authorization requirements will be enforced outside of the Highmark service area. Certain

exceptions may apply based on group specific options.

- Providers are encouraged to contact Highmark in advance of services to ensure services provided are deemed medically necessary. The Utilization Management team can also be contacted by using the number provided on the back of our member's ID card.
- Claims without authorizations will be rejected.
- Outpatient services requiring prior authorization can be found on the Highmark Provider Resource Center.

The *Professional Provider Report* is published by the Professional Relations department of Blue Cross and Blue Shield of Kansas.

Sarah Shaw,
Communications Coordinator



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Increased Call Volume, Hold Times and Self Service Options

With COVID-19 challenges lingering, hold times for providers calling into the Blue Cross and Blue Shield of Kansas (BCBSKS) Customer Service line have increased. BCBSKS is seeing lengthier hold times due to staff shortages. In an attempt to alleviate call volume and avert our providers' frustrations, please refer to the provider self-service options listed below where many of your answers may be found at your fingertips through our website, www.bcbsks.com. After exhausting your self-service options, we encourage you to contact your Provider Relations Representative for assistance.

- Member Benefits via [Avality](#) (where you can get a transaction ID number as a reference number see figure 1)

- [COVID-19 Provider Information](#)

- [Institutional Provider Manual](#) (Avality Log-in Required)

- [Professional Provider Manual](#)

- [Medical Policies](#)

- [Coding Questions](#)

- [Policy Memos](#)

- [Precertification](#)

Providers are calling to request a predetermination for provider professional services. There are very few professional services that require a predetermination or prior authorization for a BCBSKS member. If you are seeking prior authorizations for a benefit that is not required, please contact your provider representative.

*Please complete and fax the BCBSKS predetermination or prior authorization form embedded within each policy below:

- [ACA Prevention Copay Waiver Criteria – Individual Marketplace, Commercial](#)

- [BRCA 1 and BRCA 2 Testing](#)

- [Compounded Prescriptions](#)

- [Human Growth Hormone](#)

- [Intravenous and Subcutaneous Immune Globulin Therapy](#)

- [Site of Care Infusion Management](#)

Many of our pharmacy medical policies are now being maintained through our pharmacy benefit manager, Prime Therapeutics.

To find pharmacy medical policies specific to a medication list, use the links below.

- [BCBSKS BlueCare/EPO Prior Authorization](#) (offsite link)

- [BCBSKS ResultsRx Prior Authorization](#) (offsite link)

- [BCBSKS Select Prior Authorization](#) (offsite link)

To view the out-of-area Blue Plan's general pre-certification/pre-authorization information, visit our [Precertification/Pre-authorization](#) page under the providers tab on our website, www.bcbsks.com. See figure 2 for a simple screen shot of where you can enter the out-of-area members alpha prefix.

If you have additional questions, contact your Professional Relations representative or Provider Network Services in Topeka at 785-291-4135 or 800-432-3587.

Figure 1
Transaction ID for Availity - use as reference number

Figure 2
Pre-certification/Preauthorization information for out-of-area members



Pharmaceutical Formulary Update

Prime Therapeutics updates the Blue Cross and Blue Shield of Kansas formulary (preferred medication list) on a quarterly basis. Please refer to the links below when prescribing or dispensing medications for your BCBSKS patients. Coverage is subject to the limitations of the member's individual plan.

For commercial members, go to: https://www.myprime.com/content/dam/prime/memberportal/forms/2020/FullyQualified/Other/ALL/BCBSKS/COMMERCIAL/KSPREFDRUG/KS_Alpha_Drug_List.pdf

For BlueCare/EPO members, go to: https://www.myprime.com/content/dam/prime/memberportal/forms/2020/FullyQualified/Other/ALL/BCBSKS/COMMERCIAL/KSBLCREPO0/2020_KS_6T_BlueCare_Medication_List.pdf

For BlueEdge/ResultsRx medication list, go to: https://www.myprime.com/content/dam/prime/memberportal/forms/2020/FullyQualified/Other/ALL/BCBSKS/COMMERCIAL/KSRXDRUG/KS_BlueEdge_MedicationList.pdf



Attention Prescriber - New Program Allows for Prior-Authorization Expiration Notification

PA Notify - Prescriber is a new program that Prime is making available to prescribers. Prescribers will be notified of an upcoming prior authorization (PA) expiration via Cover My Meds portal or via fax. This communication is sent 30 days in advance of a PA expiration. You can sign up on our [website](#) under the CoverMyMeds header.

Clarification of COVID-19 Testing

As students head back to school and employees move back into offices, Blue Cross and Blue Shield of Kansas is clarifying our coverage of COVID-19 testing.

BCBSKS will continue to cover the cost of, with no charge to the member, diagnostic testing services which:

- Meet primary coverage criteria for COVID-19 as defined by the CDC and CMS public health service response.
- Are determined necessary by the member's healthcare provider in situations where it is not covered as part of the public health service response.

As outlined in Question 5 of the [Frequently Asked Questions About the Families First Coronavirus Response Act](#) - BCBSKS will NOT cover the cost of testing that is conducted to screen for:

- General school or workplace health and safety.
- Public health surveillance for SARS-CoV-2.
- Any other purpose not primarily intended for individualized diagnosis or treatment of COVID-19 is not covered.

Note: Testing performed for these situations should not be billed to BCBSKS.

COVID-19 Billing and Reimbursement

BCBSKS realizes that not only are these trying times but also confusing times when it comes to billing for COVID-19 testing, COVID-related services and how and when a member's cost share is applied. Below you will find a spreadsheet with timeliness of member cost sharing information as well as when BCBSKS allowances are considered payment in full for COVID-related services.

Dates of Service (Date from and Through)	Services Provided (Example Coding)	Member Cost Share Applied	COVID-Related Diagnosis (per CDC Recommendation) Example Coding
03/17/2020-06/30/2020	Flu, Respiratory and COVID-19 Testing (G2023, G2024, U0001, U0002, U0003, U0004, 0202U, 87635, 0223U, 86318, 86328, 86769, 0224U, 0225U, 0226U, C9803, 87301, 86408, 86409)	No	B33.8, B34.0, B34.2, B34.9, B97.21, B97.29, J01.90, J02.0, J02.9, J05.0, J06.9, J11.1, J12.89, J16.8, J18.0, J18.9, J20.8, J20.9, J22, J30.9, J40, J98.8, J98.11, M79.18, R06.00, R06.02, R06.09, R06.2, R07.0, R09.81, R11.10, R11.2, R19.7, R43.0, R43.2, R50.81, R51, R53.81, R53.83, R68.83, R91.8, J80, R05, R509, U07.1, Z03.818, Z11.59, Z20.828
03/17/2020-06/30/2020	Telehealth Visits and/or Office Visits (99201-99340, 99441-99443, 99241-99423, 99446-99452)	No	
04/16/2020-06/30/2020	Virtual Services- UB-04 Billing (G2061, G2062, G2063, 98966, 98967, 98968)	No	
07/01/2020-12/31/2020	Flu, Respiratory and COVID-19 Testing (G2023, G2024, U0001, U0002, U0003, U0004, 0202U, 87635, 87426, 0223U, 86318, 86328, 86769, 0224U, 0225U, 0226U, C9803, 87301, 86408, 86409)	No	
07/01/2020-12/31/2020	Telehealth Visits and/or Office Visits (99201-99340, 99441-99443, 99241-99423, 99446-99452)	Yes*	
07/01/2020-12/31/2020	Virtual Services- UB-04 Billing (G2061, G2062, G2063, 98966, 98967, 98968)	Yes*	

*With the exception of State of Kansas employees, which will not apply member cost share for these services through 10/31/2020 (Member alpha pre-fix KSE). The decision to extend coverage for this group will be reviewed on a monthly basis.

Drug Cost Transparency Tools Available for Boeing Group Members

New tools are available for Blue Cross and Blue Shield of Illinois (BCBSIL) members enrolled in a group Boeing-sponsored medical plan or Boeing Medicare Part D prescription drug plan through Blue Cross Group MedicareRx (PDP)SM and their health care providers. Boeing group member ID numbers start with these prefixes: BBE, BEM, BHP, BNK, BRG, BYR.

For ease of use, these new tools are part of electronic medical record (EMR) systems and available during e-prescribing. They include information, such as:

- Accurate total drug cost savings (based on actual payer costs and rebates) for up to three lower-cost, dose-matched clinically equivalent alternative medications.
- Notice of any prior authorization requirements, as well as alternative medication(s) that may not need a prior authorization.
- Any other notifications that may cause pharmacy call-backs to the health care professional.

By reducing pharmacy call-backs to health care professionals to resolve drug coverage issues, these tools help enhance provider productivity, identify possible treatment options that may lower a patient's out-of-pocket costs, and help improve overall patient satisfaction and adherence.

If lower-cost medication alternatives are shown, we encourage you to review the list of recommendations and determine if any changes in drug treatment are appropriate.

Boeing is one of the first groups to use this real-time prescription benefit tool, a value-added solution designed to enhance and improve your everyday workflows.

Pharmacy benefits and limits are subject to the terms set forth in the member's certificate of coverage. The listing of any particular drug or classification of drugs is not a guarantee of benefits. Members should refer to their certificate of coverage for more details, including benefits, limits and exclusions. Regardless of benefits, the final decision about any medication is between the member and

their health care provider.

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.

Prime Therapeutics LLC (Prime) is a pharmacy benefit management company providing pharmacy benefit management services for Boeing health plan members.

Prescription drug plans provided by HCSC Insurance Services Company (HISC), an Independent Licensee of the Blue Cross and Blue Shield Association. A Medicare-approved Part D sponsor. Enrollment in HISC's plans depend on contract renewal.

These new tools are offered by an independent third-party vendor that is solely responsible for its products and services. BCBSIL makes no representations or endorsements regarding the services of the vendor. If you have any questions or concerns about the products or services offered, you should contact the vendor directly.

Uploading Records via Availity

As a way to ensure that Blue Cross and Blue Shield of Kansas (BCBSKS) processes your Retrospective Reviews and First Level Appeals promptly along side all documentation, you can upload records along with your request via Availity. With almost everything advancing towards digital, having the option to upload records along with your request allows BCBSKS to service your request faster and accurately with all available information. The following instructions walk through how to send our Retrospective Review and First Level Appeal after logging into [Availity.com](https://www.availity.com).

1. After logging in, go to “Resources” and click “Forms, Publications and Procedures.”



2. Pick Claim/Enrollment Inquiry Form

Professional

Refund/Deduct Authorization Form

Claim/Enrollment Inquiry Form 

Electronic Fund Transfer (EFT) Form


Other Party Liability

FEP Blue Focus Precertification

For the rest of the professional provider forms please

3. Fill out form

Fill out the form and when selecting “Subject” you must either choose “Retrospective Review” or “First Level Appeal.” After choosing one of those options the “Add or Drop Files as needed” will appear at the bottom of the form. Add forms.

Subject (optional)
 

Admission/Service date

Type of service (optional)


Procedure code (optional)

Charge (optional)

Paid date (optional)

Question

1000 characters remaining.



Add or Drop Files as needed

Maximum number of files 5
 Maximum file size 20MB each
 Allowed types: PDF, PNG, JPG

Medical Record Retrieval Coordinator for Affordable Care Act Programs

Inovalon is authorized to retrieve medical records for out-of-area Blue members or from providers in other Plans' service areas to support Healthcare Effectiveness Data and Information (HEDIS), Risk Adjustment, and government required programs related to the Affordable Care Act on Blue Cross and Blue Shield of Kansas' behalf.

Inovalon is an experienced healthcare analytics company and best-in-class supplier. The vendor will provide an efficient centralized process to coordinate medical record requests from Blue Cross and Blue Shield companies across the country and help reduce multiple requests for patient data.

Effective medical record retrieval services play a fundamental role in driving optimal quality reporting outcomes and ensuring appropriate risk scores.

Blue Cross Blue Shield Plans will initiate their annual projects on:

HEDIS start date: Jan 2021

HEDIS end date: May 2021

MRA start date: May 2021

MRA end date: Dec 2021

HRADV start date: Jan 2021

HRADV end date: Sept 2021

CRA/RADV start date: Jan2021

CRA/RADV end date: Dec 2021

As outlined in your contract, you are required to respond to requests in support of Risk Adjustment,

HEDIS, and other government required activities within the requested time frame. This includes requests from Inovalon on our behalf. Blue Cross and Blue Shield of Kansas is working diligently to make this process as simple as possible.

For your convenience medical records may be submitted to Inovalon in the following ways:

- Phone: 844-682-9764 (for questions on delivery options/methods)
- Fax: 877-221-0604
- FedEx: For further instruction on returning records via FedEx, please call 800-463-3339
- Email Address: EMRService@inovalon.com (send secure)

HIPAA/Privacy

Inovalon is contractually bound to preserve the confidentiality of health plan members' protected health information (PHI) obtained from medical records, in accordance with HIPAA regulations. Please note that patient-authorized information releases are not required in order for you to comply with these requests for medical records.

Providers are permitted to disclose PHI to health plans without authorization from the patient when both the provider and health plan had a relationship with the patient and the information relates to the relationship [45 CFR 164.506(c)(4)]. For more information regarding privacy rule language, please visit <http://www.hhs.gov/ocr/privacy>.



Action Required - Provider Business Arrangements

Providing Blue Cross and Blue Shield of Kansas (BCBSKS) with information on the business arrangements your practice/facility has in place helps us to serve our providers better. It also assists us in safeguarding your patient and our member's Personal Health Information (PHI) and Personal Identifying Information (PII).

Each billing NPI number on file for a provider's tax identification number should provide a "yes" or "no" response, indicating whether your practice/facility employs a business partner that may contact BCBSKS on behalf of your practice/facility. Providers will be reminded annually to confirm any existing business arrangements or to attest to not having any business arrangements.

What is a Business Arrangement?

Any arrangement where another entity, defined here as a business partner (includes partners in the United States and Offshore), is performing services on your (the contracting provider's) behalf that involves the use, transmission, or disclosure of protected health information (PHI) or personal identifying information (PII).

Why does BCBSKS need this information?

Protecting PHI is a top priority at BCBSKS. By providing us with the names of your business partners, BCBSKS can validate the caller when an inquiry is received. This allows us to safely respond to the inquiry without delaying service to your practice.

To report a business arrangement or to attest to not having any current business arrangements, please follow the path below:

[Availity.com](#)>Payer Spaces>BCBSKS>BCBSKS Provider Secure Section (Blue Access)>Select NPI number for practice/facility you wish to attest on>Provider Information>Business Arrangements



Avoidance of Antibiotics

Avoidance of Antibiotics with Acute Bronchitis/Bronchiolitis (AAB) is a Healthcare Effectiveness Data and Information Set measure, and is incentivized through the Blue Cross and Blue Shield of Kansas (BCBSKS) Quality-Based Reimbursement Program (QBRP).

For this measure, the percentage recorded is the number of members 3 months and older that are not prescribed antibiotic treatment for a diagnosis of acute bronchitis/bronchiolitis on the first office encounter in an otherwise healthy adult. To meet the QBRP incentive, the percentage must be greater than or equal to 30 percent.

The Center for Disease Control and Prevention (CDC) recommendations state antibiotics will not help most cases of uncomplicated acute bronchitis/bronchiolitis. The usual cause of acute bronchitis/bronchiolitis is a respiratory virus that generally will improve in a week or two without antibiotic therapy. Appropriate use of antibiotics for patients with acute bronchitis/bronchiolitis

can help avoid harmful side effects and possible antibiotic resistance over time.

While a higher percentage is better, many provider groups with more than 30 instances are below a conservative, target percentage of 30. The overall performance for BCBSKS providers for this measure was 38.0 percent for the reporting period of January 1, 2019 to December 31, 2019.

The CDC offers helpful information for both patients and providers related to appropriate antibiotic use, antibiotic resistance, when antibiotics are needed, and general advice for patients on how to feel better when experiencing symptoms of an upper respiratory infection.

These helpful resources can be found at <https://www.cdc.gov/antibiotic-use/community/materials-references/index.html>.

If you have additional questions, contact your Professional Relations representative or Provider Network Services in Topeka at 785-291-4135 or 800-432-3587.

CDC Offering Free Continuing Education Credits

The Center for Disease Control and Prevention (CDC) has over 10 hours of free Continuing Education credits available for providers at <https://www.cdc.gov/antibiotic-use/community/for-hcp/continuing-education.html>. We encourage our providers to participate during US Antibiotic Awareness Week which is November 18-24, 2020.

QBRP Eligibility Reminder

As a reminder, the QBRP program applies to all BCBSKS CAP, PPO, FEP, and BlueCard professional providers and services except for clinical lab (using codes on the Medicare clinical lab fee schedule), pharmacies and pharmaceuticals, and dental services.

*Note: Venipuncture is included on the Medicare clinical lab fee schedule, therefore excluded from being QBRP eligible.

Modifiers for Diabetic Equipment and Supplies

Diabetic equipment and supply billing reminder: When billing for diabetes related equipment and supplies be sure to affix the appropriate required modifier to each code.

- Modifier KX is required for diabetic patients being treated with insulin (4 or more shots per day), when reporting glucose monitor (modifier NU) and other diabetes related supply codes.
- Modifier KS is required for diabetic patients not being treated with insulin (or are receiving 3 or less insulin shots per day), when reporting glucose monitor (modifier NU) and other diabetes related supply codes.

BCBSKS Retirements, Promotions and New Staff

Fred Palenske retired with more than 30 years of service at Blue Cross and Blue Shield of Kansas on September 1, 2020. Fred began his career at BCBSKS in 1988 as a contract specialist. He held several different positions before being promoted to his current role as Senior Vice President, Provider and Government Affairs in 2013. Debra Meisenheimer retired August 31st after 34 years of service to Blue Cross and Blue Shield of Kansas as a Professional Relations Representative. BCBSKS thanks Fred and Debra for their careers of dedication and wishes them both the best as they begin their retirements.

With the departure of Fred, we are pleased to announce that Dr.

John Fong has been promoted to Senior Vice President, Provider and Government Affairs, Chief Medical Officer. Dr. Fong joined BCBSKS in August 2019. We are also excited to announce that Angie Strecker was promoted to Vice President, Provider Relations and Medical Economics on September 6, 2020. Angie started her career at BCBSKS in December 1985 and joined Provider Relations in 1992. Angie has held various roles in provider relations including her current role as Director of Institutional Relations since 2010.

Another familiar name, Christy Richards, will be the representative for providers who previously worked with Debra. Christy has spent the last 10

months working with Debra as her support. Christy brings an extensive coding background both as a certified coder and auditor. Christy's experience in the healthcare arena will lend expertise to the providers she represents. Her recent Dental Coding Certification will provide guidance to the dental providers within her new territory. Welcome Christy! Please also join us in welcoming, Mia Decoster, as Christy's new Professional Relations Support. Welcome Mia!

The [Professional Relations Field Representative Territorial Map](#) has been updated to reflect this change.

Web Changes — Medical Policy

Since the publication of Blue Shield Report [S-4-19](#), the following new or revised medical policies have been posted to our Web site at: <https://www.bcbsks.com/CustomService/Providers/MedicalPolicies/policies.shtml>

- Cardiac Computed Tomography (CT)
- Ambulatory Event Monitors and Mobile Cardiac Outpatient Telemetry
- Analysis of Human DNA in Stool Samples as a Technique for Colorectal Cancer Screening
- Aqueous Shunts and Stents for Glaucoma
- Artificial Intervertebral Disc: Cervical Spine
- Artificial Pancreas Device Systems
- Assays of Genetic Expression in Tumor Tissue as a Technique to Determine Prognosis in Patients with Breast Cancer
- Autologous Chondrocyte Implantation for Focal Articular Cartilage Lesions
- Automated Ambulatory Blood Pressure Monitoring for the Diagnosis of Hypertension in Patients with Elevated Office Blood Pressure
- Balloon Sinuplasty for Treatment of Chronic Sinusitis
- Bio-Engineered Skin and Soft Tissue Substitutes
- Bone Mineral Density Studies
- Computed Tomography (CT) to Detect Coronary Artery Calcification
- Cone Beam Computed Tomography (CBCT) (Availity login required)
- Contrast-Enhanced Coronary Computed Tomography Angiography (CCTA) for Coronary Artery Evaluation
- Corneal Topography/Computer-Assisted Corneal Topography/Photokeratoscopy
- Cryosurgical Ablation of Miscellaneous Solid Tumors Other Than Liver, Prostate, or Dermatologic Tumors
- Cytoreductive Surgery and Hyperthermic Intraperitoneal Chemotherapy for Select Intra-Abdominal and Pelvic Malignancies
- Diagnosis and Medical Management of Obstructive Sleep Apnea Syndrome
- Diagnosis and Treatment of Sacroiliac Joint Pain
- Dry Needling of Myofascial Trigger Points
- Dynamic Posturography
- Eteplirsen (Exondys 51) and Golodirsen (Vondys 53) for Duchenne Muscular Dystrophy
- Extracranial Carotid Artery Stenting
- Fundus Photography
- Gene Expression Profiling and Protein Biomarkers for Prostate Cancer Management
- Gene Expression Profiling for Uveal Melanoma
- Genotype-Guided Tamoxifen Treatment
- Human Growth Hormone
- Hydrogel Spacer use During Radiotherapy for Prostate Cancer
- Identification of Microorganisms Using Nucleic Acid Testing
- Influenza Virus Diagnostic Testing and Treatment in the Outpatient Setting
- Injectable Bulking Agents for the Treatment of Urinary and Fecal Incontinence
- Insulin Pump
- Intensity Modulated Radiotherapy (IMRT)
- Interspinous and Interlaminar Stabilization / Distraction Devices (Spacers)
- Laboratory Tests for Heart and Kidney Transplant Rejection
- Magnetic Resonance Imaging (MRI) of the Breast
- Magnetic Resonance Spectroscopy
- Measurement of Serum Antibodies to Infliximab and Adalimumab
- Microwave Tumor Ablation
- Myocardial Strain Imaging
- Noninvasive Prenatal Screening for Fetal Aneuploidies and Microdeletions Using Cell-Free Fetal DNA
- Pachymetry
- Positron Emission Tomography (PET) Scanning: Cardiac Applications
- Positron Emission Tomography (PET) Scanning: In Oncology to Detect Early Response During Treatment
- Positron Emission Tomography (PET) Scanning: Miscellaneous (Non-cardiac, Non-Oncologic) Applications of Fluorine 18 Fluorodeoxyglucose
- Positron Emission Tomography (PET) Scanning: Oncologic Applications
- Radioembolization for Primary and Metastatic Tumors of the Liver
- Scintimammography and Gamma Imaging of the Breast and Axilla
- Sensorimotor and Neurobehavioral Status Exams for Optometric Providers
- Site of Care Infusion Management
- Surgical Deactivation of Headache Trigger Sites
- Testing for Vitamin D Deficiency
- Transcatheter Arterial Chemoembolization (TACE) to Treat Primary or Metastatic Liver Malignancies
- Transcranial Magnetic Stimulation (TMS)
- Video EEG Monitoring
- Virtual Colonoscopy / CT Colonography