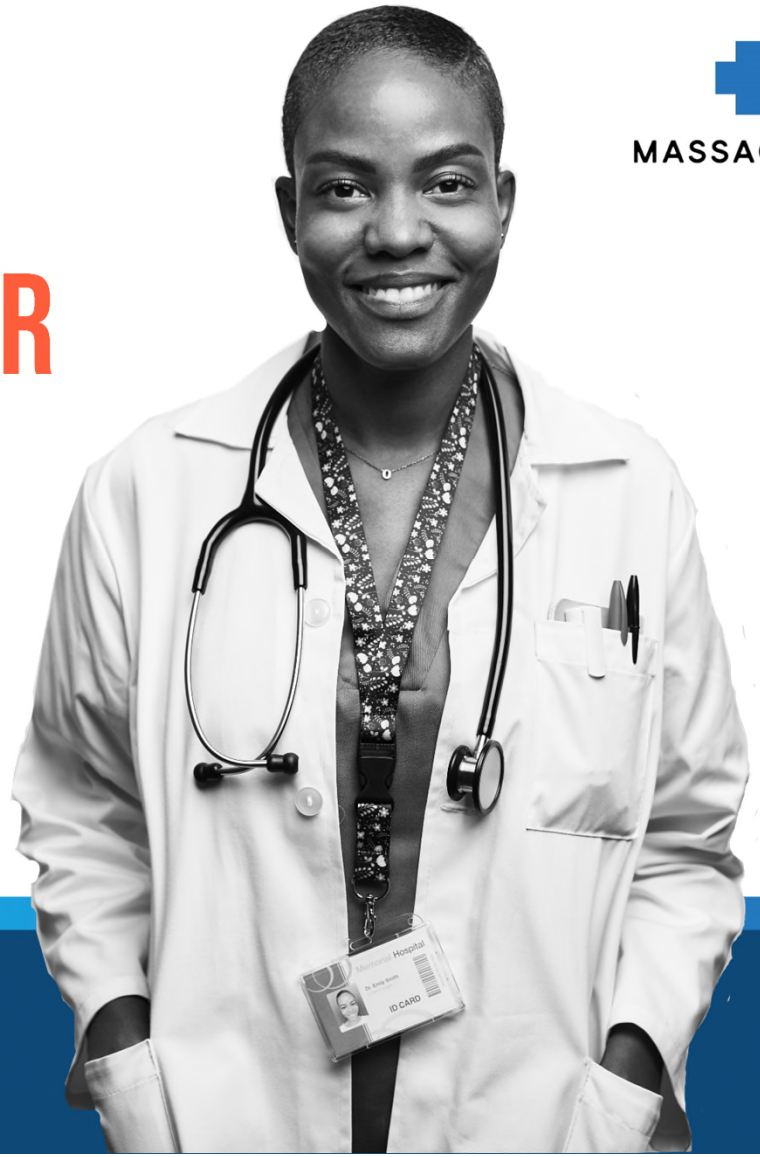
BLUE CROSS UPDATES FOR 2023

May 25, 2023

Tina Cruz and Kristin Reid
Provider Network Management



LEGAL NOTES

MASSACHUSETTS

These training materials have been provided to help you in your administrative interactions with Blue Cross Blue Shield of Massachusetts (Blue Cross).

The information and representations herein do not replace or supersede the terms of your Blue Cross provider Agreement, your *Blue Book* manual or *Indemnity Handbook*, or other Blue Cross policies and procedures.

To the extent the foregoing terms and policies conflict with or are otherwise inconsistent with anything in these training materials, your Blue Cross provider Agreement, your *Blue Book* manual or *Indemnity Handbook*, or other Blue Cross policies and procedures will govern.

MASSACHUSETTS

CONTENT

Blue Cross & Industry News

Technology Updates

Reminders

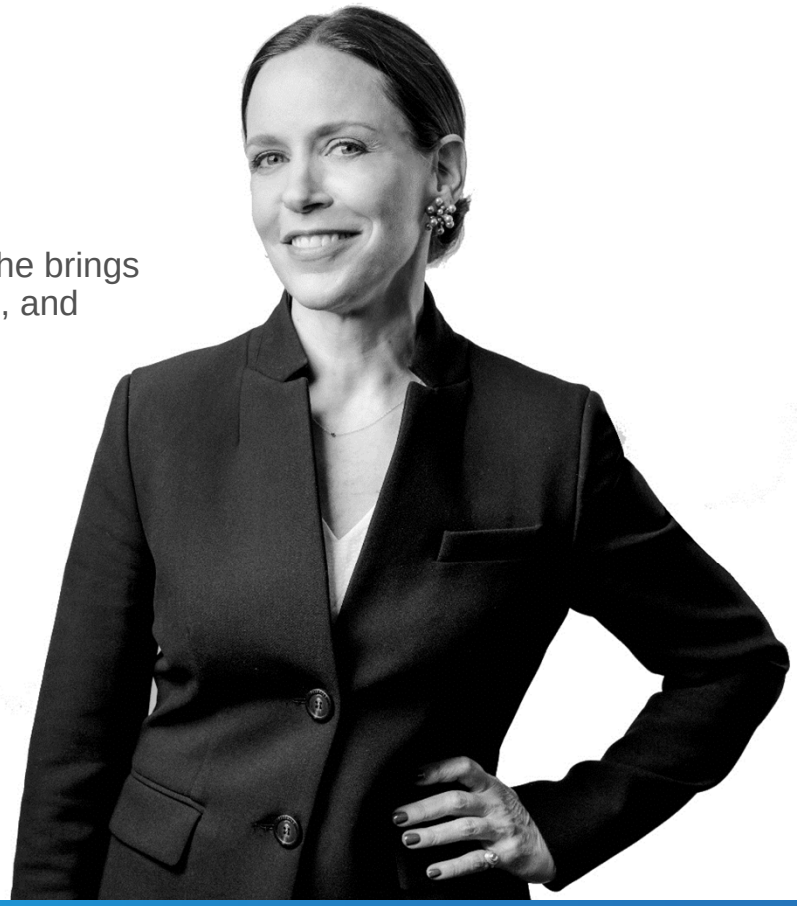
MASSACHUSETTS

BLUE CROSS & INDUSTRY NEWS

INTRODUCING SARAH ISELIN, OUR NEW BLUE CROSS PRESIDENT AND CEO

Sarah has a long and successful history with Blue Cross and our Foundation. She brings nearly 30 years of experience in health care strategy, policy, operations, finance, and philanthropy. She's passionate and dedicated to our mission, which is:

> **THE RELENTLESS PURSUIT OF QUALITY, AFFORDABLE AND EQUITABLE HEALTH CARE WITH AN UNPARALLELED CONSUMER EXPERIENCE.**



HEALTH EQUITY AND ENVIRONMENTAL IMPACT

HEALTH EQUITY

Five of the largest health care systems have signed our payment agreement rewarding organizations and physicians for eliminating racial and ethnic inequities. They care for more than 550,000 Blue Cross members.

"We believe nearly all clinicians already want to reduce racial and ethnic inequities in care. By incorporating equity measures into our payment models, we intend to create an explicit business case for large health care systems to increase their investments in … programs that produce measurable improvements in equity."

Mark Friedberg, Senior Vice President, Performance Measurement & Improvement

CARBON NEUTRAL BY 2030

During the past decade, we've made strides to reduce our use of electricity, water and paper, and cut the amount of waste going to landfills by almost 80%. But there's more we can do.

"We're dedicated to achieving zero waste and advancing a circular economy by reducing single-use items wherever possible, eliminating waste and pollution and circulating products and materials."

Lindsey Butler, MSc, PhD
Director, Climate and Health Resilience

2023 PRODUCTS AND BENEFITS FOR MEDICARE ADVANTAGE:
LOWER COPAYMENTS AND COST SHARE CHANGES

ROUTINE & PREVENTIVE CARE

$0 COPAY

FOR MANY MEDICARE ADVANTAGE PLANS

$260 ANNUAL ALLOWANCE

FOR OVER-THE-COUNTER WELLNESS AND HEALTH CARE PURCHASES

COMPREHENSIVE & PREVENTIVE DENTAL CARE

$1,000

CALENDAR YEAR MAXIMUM

PPO SAVER AND VALUE PLANS

$0 VACCINES, $35/MONTH

INSULIN COPAY

For more information, visit our Provider Central News article "Changes to our products and benefits for 2023" published on December 1, 2022.

CVS CAREMARK IS NOW OUR PHARMACY BENEFIT MANAGER

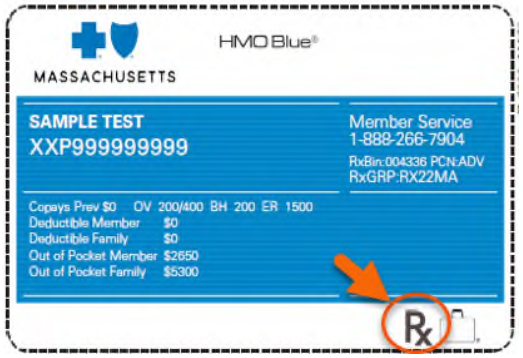
MASSACHUSETTS | CVS caremark®

Members affected

- Commercial
- Group Medex®’
- Medicare Advantage

Look for RX on member ID card

- RX symbol means the member has pharmacy coverage with Blue Cross



2023 BENEFIT FEATURE: VIRTUAL CARE TEAM

- Includes primary care and mental health
- Welcome kit with connected medical devices, such as blood pressure monitor, for virtual visits.
- No cost share (in most cases); deductibles apply
- Virtual Care Team can refer members for in-person care (access to plan's full network)
- Can securely share medical records to ensure continuity of care

Carbon Health

fireflyhealth

Members can choose a PCP associated with either of these organizations.

For more information, see "Changes to our products and benefits for 2023" published in Provider Central News on December 1, 2022.

OUR VISION:
BE THE BEST HEALTH PLAN FOR MENTAL HEALTH

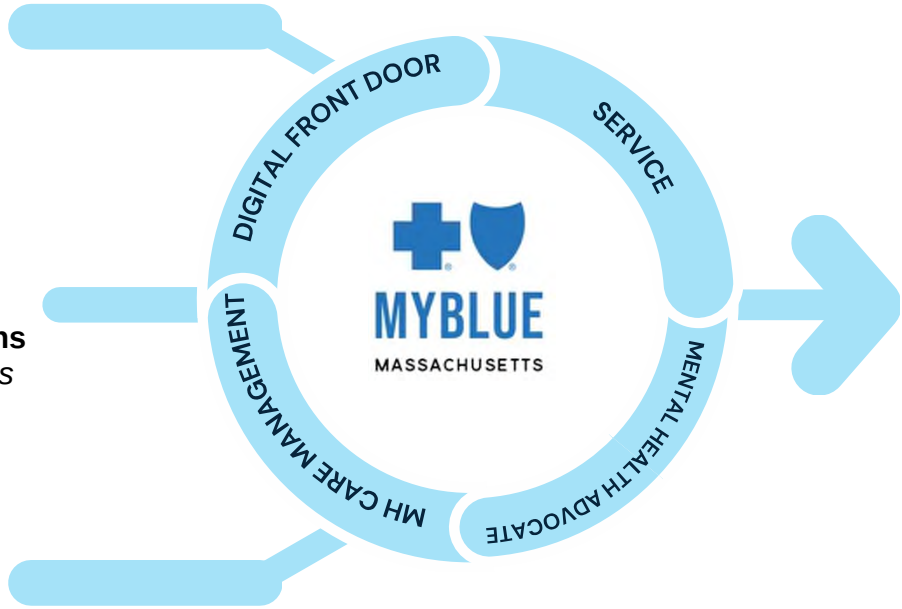
- Navigate members in need of mental health care to affordable and appropriate care
- Expand our network of mental health care providers to improve access
- Promote care models **integrating physical and mental health care**

MENTAL HEALTH STRATEGY: IMPROVING THE JOURNEY TO CARE

SELENA
Open to any help
"Mild" symptoms

JENN
Significant and specific expectations
"Moderate" symptoms

SEAN & CHRIS
Adult taking care of another
"*Severe" symptoms*



VARIETY OF SETTINGS

EAP & self-management

PCP with Mental Health

Primary Mental Health Groups (offer therapy and medication management)

Subspecialty Mental Health

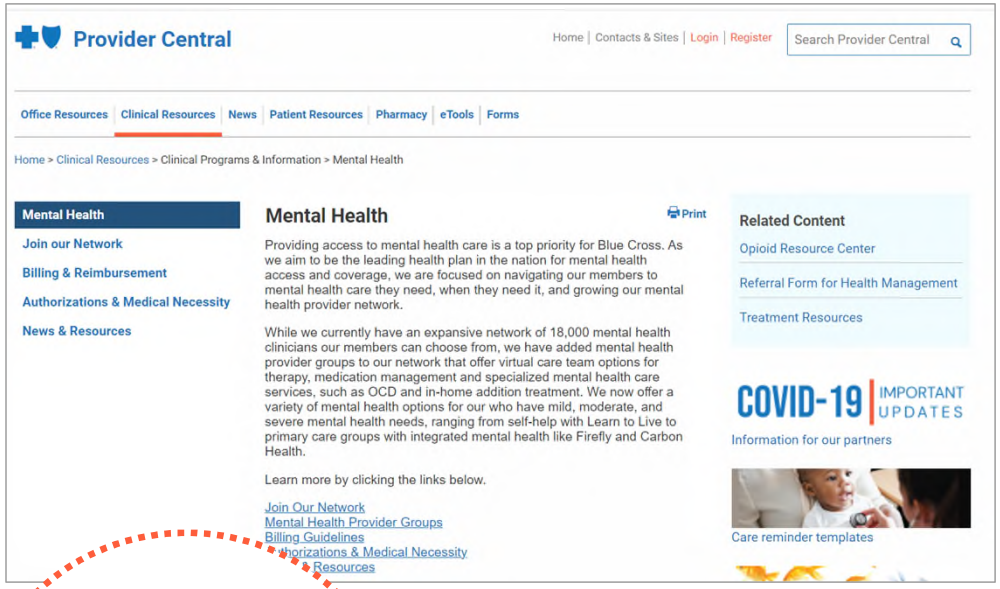
Independent Practitioners

WellConnection video visits

Intermediate & Inpatient Care

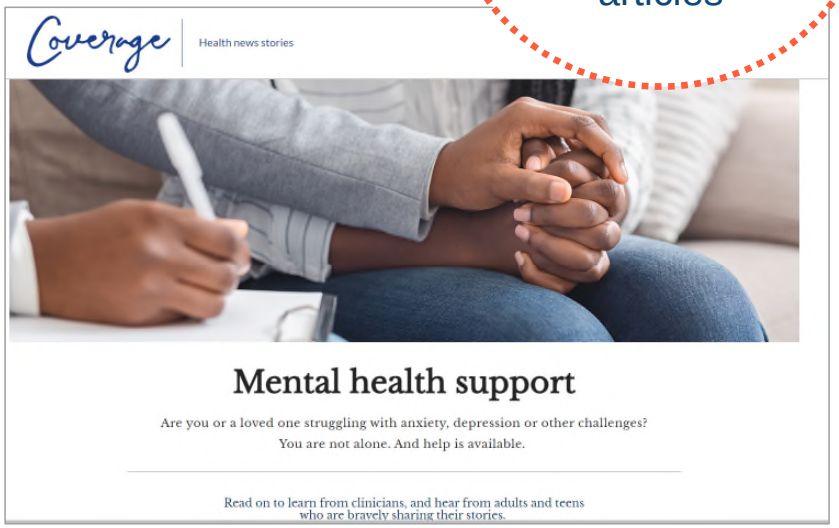
ABA and other services

MENTAL HEALTH HUB ON PROVIDER CENTRAL



New!
Mental Health page on Provider Central

Page links to Coverage news service mental health articles



Trouble viewing this email? View the web version

MARCH 2023

MENTAL HEALTH BRIEF
News For You

MASSACHUSETTS

Our *Mental Health Brief* helps you stay up-to-date on Blue Cross Blue Shield of Massachusetts news that affects your practice.

Now available! New Provider Central mental health page
Our new Provider Central mental health page is here. It contains all the mental health-related resources you need to do business with us in one central location. It includes:

- A list of the new primary and specialty mental health care provider groups that you can refer your patients to
- Helpful resources to share with your patient, including a link to our member MyBlue Mental Health Options page
- Authorization, medical necessity details, and payment information
- Our *Mental Health Brief* archives

Helping members find mental health care
We have a new digital "destination" on MyBlue that makes it easier than ever before for your patients, our members, to understand their options and navigate to a mental health provider. If your patient is struggling with finding care, please point them to our MyBlue Mental Health Options page. From there, your patient can answer 4-5 questions to help assess their mental health needs, and once they complete the questionnaire, they'll see personalized results. To access the page, members must sign into their MyBlue account, then scroll down and click on "Find Mental Health Care That Works for You." Alternatively, members can sign in and click on My Care>Mental Health Options. Here, members can find and reach out to a suitable provider directly to schedule an appointment.

OUR QUARTERLY EMAIL TO MENTAL HEALTH AND PRIMARY CARE CLINICIANS

MENTAL HEALTH BRIEF

MASSACHUSETTS

TECHNOLOGY UPDATES

AUTHORIZATION MANAGER

- Request authorizations and check status
- Search member-specific authorization requirements by code
- View authorization-related correspondence
- Attach clinical to an existing case

VS.

CONNECTCENTER

- Check Blue Cross member eligibility and benefits
- Verify claim status
- Submit 1500 claims
- Search, monitor, and manage claims

BOTH

Enter and verify referrals

You can continue to use Payspan for your electronic remittances!

FUNCTIONALITY OF KEY ETOOLS

	Carelon (AIM)	Authorization Manager	Chiropractic Authorizations	Connect Center	Payspan
Claims – Check status, all				●	
Submit 1500 claims				●	
Check status, processed claims					●
Prior Auth – Request, check status (most services)		●			
Request, check status (specific services)	●		●		
Search requirements		●			
Referrals – Enter, verify		●		●	
Financial – Direct deposit, payment advisories					●

AIM CHANGED ITS NAME

AS OF MARCH 1, 2023

AIM IS NOW CARELON

- AIM Specialty Health has joined Carelon Medical Benefits Management.
- We have updated the name on Provider Central.
- **This doesn’t impact the services they offer or how they work with you.**

MASSACHUSETTS

REMINDERS

PRIOR AUTHORIZATION CHANGES

EFFECTIVE APRIL 1
UPDATED PRIOR AUTHORIZATION REQUIREMENTS FOR
SPINE, JOINT, PAIN MANAGEMENT SERVICES

- Includes pre-scheduled inpatient and outpatient musculoskeletal services, including spine, joint, and pain management procedures.
- Applies to our commercial (HMO, PPO) and Medicare Advantage members, and does not impact Federal Employee Program (FEP) members.
- Use Authorization Manager to submit initial authorization requests for musculoskeletal services.

Tips, guides, video on Provider Central Authorization Manager page

EFFECTIVE JUNE 1

USE AUTHORIZATION MANAGER

FOR REFERRAL & AUTHORIZATION SUBMISSIONS, REQUESTS, & STATUS

etools page

THIS REQUIREMENT APPLIES TO:

- Initial inpatient requests
- Initial service requests (includes requests for home care and physical therapy, which are considered an authorization)
- Outpatient referrals
- Initial mental health inpatient requests
- Initial mental health service requests
- Authorization status inquiries

Important requirement: Applies to commercial and Federal Employee Program. For resources, including quick tips and videos, go to bluecrossma.com/provider and click eTools>Authorization Manager.

PROVIDER DIRECTORY UPDATES

Members search for providers online

Incorrect information affects members' ability to access care

Providers are required by contract to keep directory information current

- Provider information changes often; please update as changes occur
- Directory validation is ongoing
- Federal law (CAA) requires all providers and health insurers to verify provider directory information every 90 days

Directories help patients find the care they need. We're committed to creating accurate directories that serve member needs.

TELEHEALTH

We continue to reimburse mental health services at the in-person rate in perpetuity.

We also continue to pay for telehealth services for primary care and chronic condition diagnosis claims at the in-person rate at this time.

View our payment policies by signing into Provider Central at bluecrossma.com/provider and going to:

Patient Resources > Sites of Care > Telehealth > Payment Information

Telehealth – Medical Services payment policy
Telehealth – Mental Health payment policy

CLAIMS TOPICS REFRESHER

TIMELY FILING GUIDELINES

Per the standard Provider Agreements, our timely filing limits are:

For	If the policy is	The filing guideline is
Initial claim submissions	HMO/POS PPO Medicare Advantage	90 days from the date of service or the date of discharge for authorized inpatient stays
	Indemnity	One year from date of service or the date of discharge for authorized inpatient stays

Guidelines

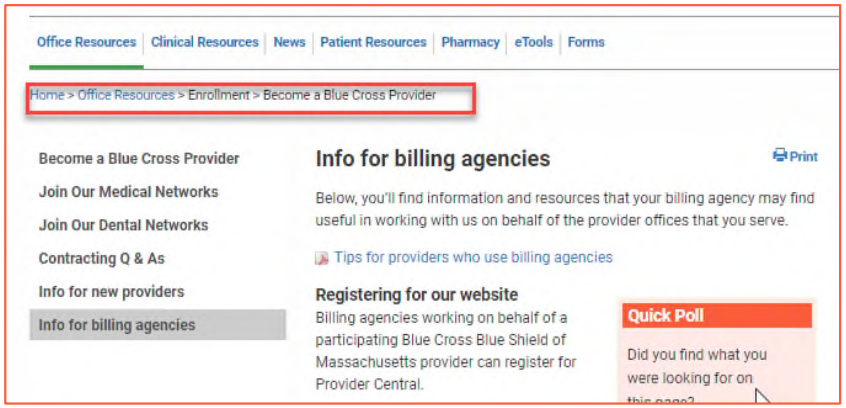
Training video

+ OTHER CLAIMS TOPICS

- Claim status check
- Claim filing timelines
- Claim appeals
- Overpaid claims
- Claim processing rules
- How long it takes for a claim to process
- When we are secondary to Medicare

Claims topics

WORK WITH A BILLING AGENCY?



If you work with a billing agency, please educate them on inquiries they may make to Blue Cross, including on these processes:

- Checking the status of a claim
- How to research rejected claims
- Understanding our timely filing guidelines
- When and how to submit a replacement claim
- Knowing our appeals process

We have more tips and information for billing agencies on **Provider Central**! Go to Office Resources> Enrollment> Become a Blue Cross Provider> Info for billing agencies.

Training video: Information for billing agencies: How to work with Blue Cross

Reminder: Billing agencies can register to work on your behalf in Provider Central.

FOLLOWING UP ON APPEALS

Appeals address:
PO Box 986065
Boston, MA 02298

Training video: Appeal Status

Tips and best practices

- We do not give appeal status over the phone
- Allow us time to review your appeal before following up (at least 30 days after you submit it)
- Appeals are worked in the order they are received
- Have your claim information ready when calling
- On Provider Central's Reviews & Appeals page, you can see the list of dates of appeals we are working. Or, you can hear an automated message when you call Provider Service
- Once your appeal has been reviewed, we'll notify you by letter, fax, or an adjusted Explanation of Benefits
- The address to submit appeals does not differ based on the member; if calling about 5 different members, you don't have to ask for the appeals address 5 separate times on the same call

Please share these messages with any third-party billing agencies or vendors that work on your behalf.

THANK YOU

bluecrossma.com/provider


MASSACHUSETTS