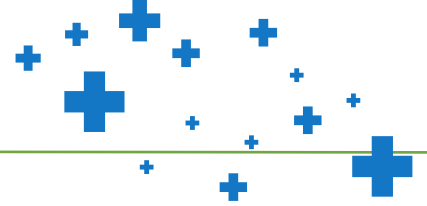


# BlueCare Tennessee

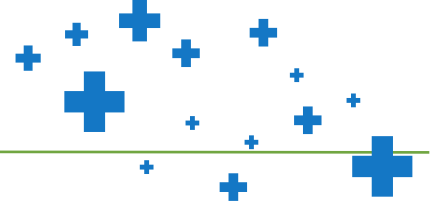


## All Blue 2014 Workshops



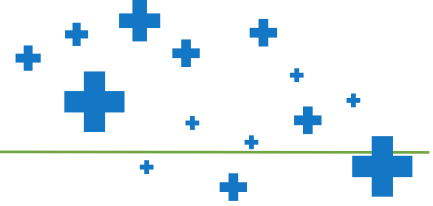
## Topics

- + Statewide Implementation
  - Member Transitions
  - Continuity of Care
  - PCP Assignment
  - Non-emergency Transportation
- + Behavioral Health Changes
- + Quality Improvement
  - TENNderCare Medical Records
  - Crimson Care Management
  - Language Assistance
- + [bluecare.bcbst.com](http://bluecare.bcbst.com)
- + Claims Billing Reminders



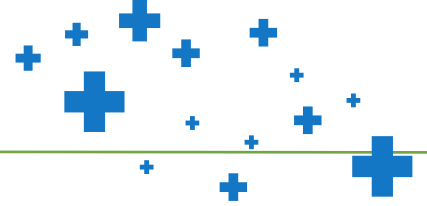
## Statewide Implementation

- + Effective Jan. 1, 2015, BlueCare Tennessee will once again be Statewide.
  
- + What does this mean to you?
  - For Middle Tennessee, members will be transitioned to us from the other 2 Managed Care Organizations (MCO)
  
  - For East & West, BlueCare will be losing members to the other 2 MCOs.



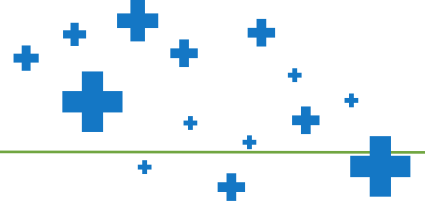
## Member Transitions

- + Member Notification Process
  - Plans anticipate receiving mass transfer of membership late October
  - Notices to members, by the Bureau, to occur on Nov. 14, 2014
  
- + Member Transition Hotline
  
- + ID Cards and benefits information will be mailed prior to Jan. 1, 2015



## Continuity of Care

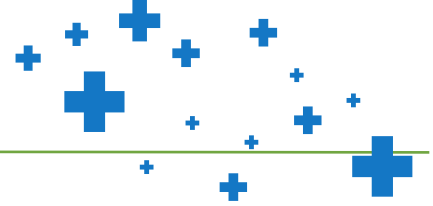
- + Authorization process
- + Global authorizations
- + Inpatient authorizations
- + Continuation of Care
- + Call Utilization Management
  - 1-888-423-0131



## PCP Assignment

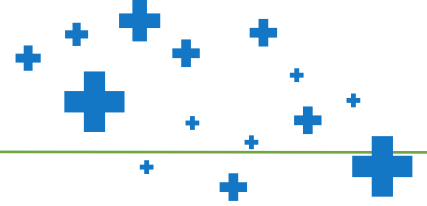
Background: New Contractor Risk Agreement (CRA) requirements regarding reimbursement for services rendered to members by assigned PCPs

- + Phased Approach
  - PCP/Member Alignment
  - Provider Education
  - PCP Notification
  - Claim Denial Implementation
  - Member Management
- + Updates will be communicated via the monthly BlueAlert and on our website, [bluecare.bcbst.com](http://bluecare.bcbst.com)



## Non-Emergency Transportation Changes

- + Contracted with Southeastrans, Inc. to provide non-emergency transportation
- + Call Southeastrans on the member's behalf to arrange non-emergency transportation
  - East Region 1-866-473-7563
  - Middle Region 1-866-570-9445
  - West Region 1-866-473-7564
  - TennCareSelect – Statewide 1-866-473-7565



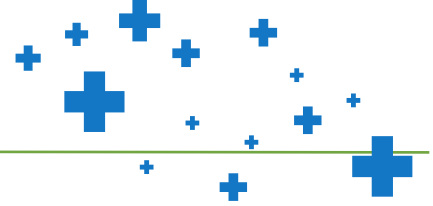
## Claims Billing Reminders

- + Hospital reimbursement for member confinement on Jan. 1, 2015 will be reimbursed under transition rules
- + For members hospitalized prior to January 1, and continuing to be hospitalized after these dates, file a **split** bill

### Example:

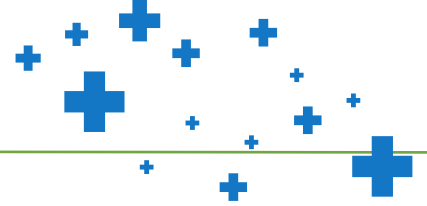
- Claims with dates(s) of service prior to these dates should be filed with the member's current MCO
- All claims with dates of service after the contract effective date should be filed to BlueCare and will be paid on a Per Diem basis up to the maximum diagnostic related group (DRG) allowable





## Behavioral Health Changes

- + Effective Jan. 1, 2015, BlueCare Tennessee will be carving in behavioral health services
- + Providers must be credentialed and contracted with BlueCare Tennessee prior to Dec. 31, 2014
- + Professional deadline is Sept. 1, 2014 for completing credentialing applications through Council for Affordable Quality HealthCare, Inc. (CAQH)
- + Facility deadline is Sept. 1, 2014 for completing the credentialing application and Ownership and Disclosure form (OWDC)



## Provider Questions Related to Behavioral Health

- + Providers should contact their local Behavioral Health Provider Network Manager with questions.

### **East Knox/Interim Upper East Region**

Bob Deatherage

(865) 202-2861

Robert\_Deatherage@bcbst.com

### **East/Chattanooga**

Sam Hatch

(423) 535-4204

Sam\_Hatch@bcbst.com

### **Middle Region**

Lee Green

(615) 483-7886

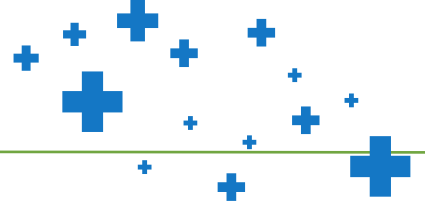
Lee\_Green@bcbst.com

### **West Region**

Phillip Gomez

(731) 664-4122

Phillip\_Gomez@bcbst.com



## BlueCare Tennessee Quality Improvement

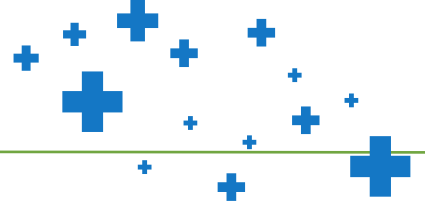
✚ Closing member gaps in care is highly important in saving the lives of all Tennesseans!

- We need YOU to partner and collaborate with us in improving members' health!

✚ Taking these following important steps, can save lives:

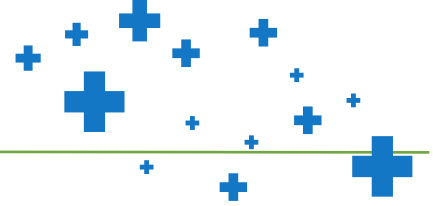
- Educate members during every visit on ways to improve upon their respective condition.
- Schedule appointments and send reminders to members.
- “Get Members In” - Close member gaps in care by providing age and gender recommended preventive and chronic care screenings at every appointment.
- Focus on improving health care disparities:
  - Quality Interactions® Training - A program designed to help health care providers treat an increasingly diverse patient population.

**Focus on important Cross Cultural training opportunities offered at no cost via the “Provider” page of the company website at [www.BCBST.com/providers](http://www.BCBST.com/providers).**



## What can you do to partner with us to improve health care quality for members?

- ✚ Ensure members receive needed preventive tests and screenings (such as, but not limited to):
  - Mammography Screenings
  - Cervical Cancer Screenings
  - PAP Tests
  - Chlamydia Screenings
  - Comprehensive Diabetes Care Test Screenings
  - BMI Assessments
- ✚ Remind members **to take** their required and prescribed **medication** and follow-up on the **appropriate use** of required and prescribed **medication**.
- ✚ Schedule **required follow-up appointments** post member hospital visits.
- ✚ Ensure members are seen by you or a practitioner within your group for **regularly scheduled well-visits**.
- ✚ Ensure members are seen for **postpartum care** within the required timeframes post delivery.



# TENNderCare Medical Record Documentation

## \*Reminders

- + Clinical Reviews of medical records are completed periodically
- + Compliance with documentation standards is important
- + Age appropriate elements, identification of risk factors, periodicity for procedures and immunizations should be provided at each TENNderCARE encounter **based on the most current *American Academy of Pediatrics Recommendations for Pediatric Health Care***.

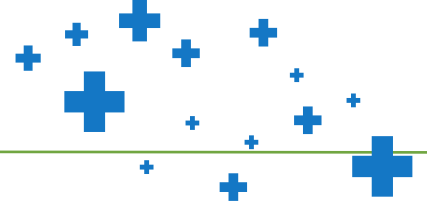
Documentation should provide reasons for not performing any element, or member refusal of any or all elements of this exam

- + For additional information please visit:  
[www.tnaap.org/EPSTD/EPSTDmanual.htm](http://www.tnaap.org/EPSTD/EPSTDmanual.htm)



# Crimson Care Management

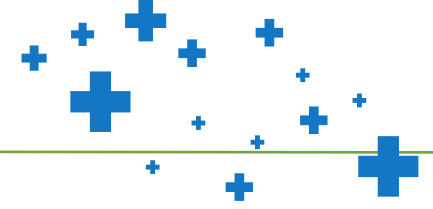
*SelectKids* Member Health Information – Secure. Online.



## Introducing Crimson Care Management

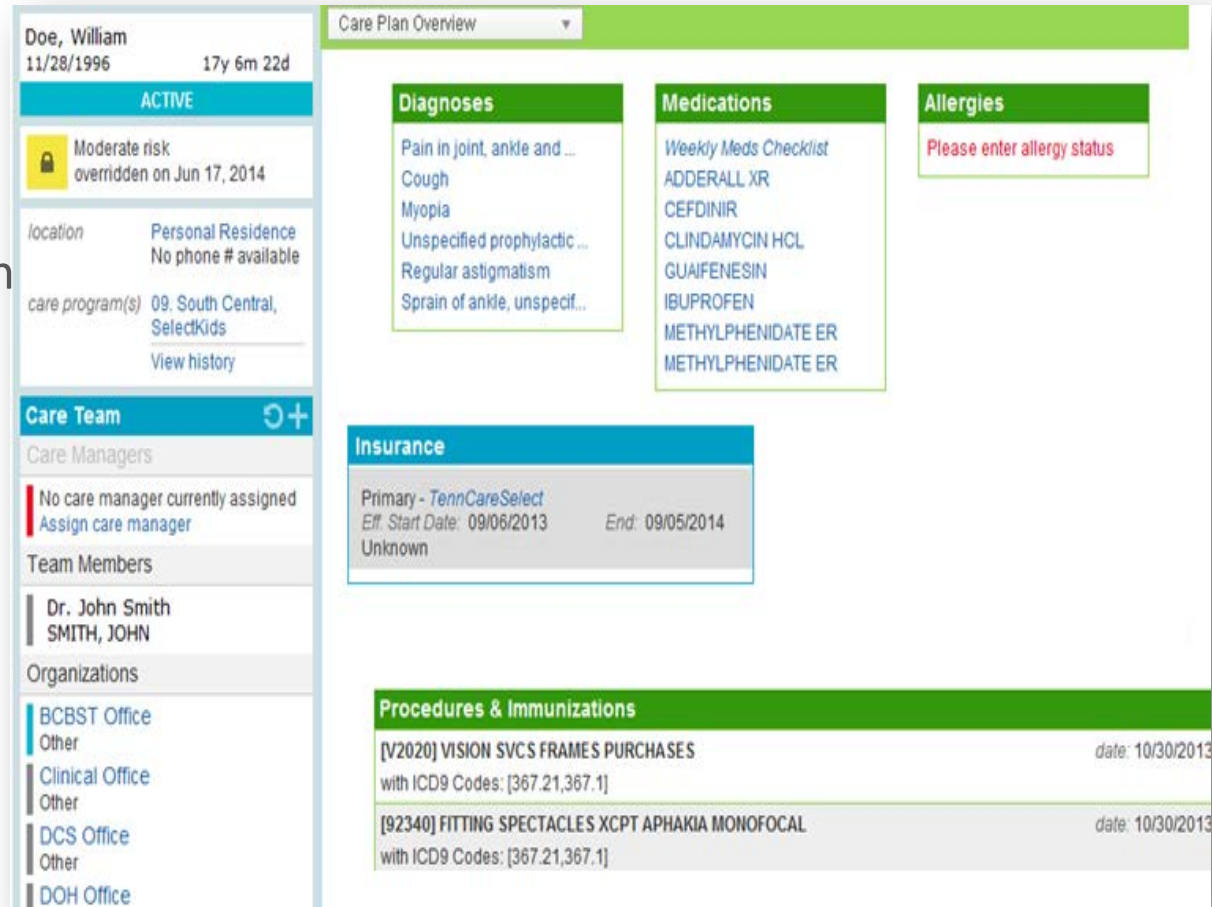
- + **Crimson Care Management (CCM)** is an online portal that enhances the coordination of health care for children in state custody and enrolled in the *TennCareSelect* program.
  
- + **Best Provider Network (BPN)** Providers and staff can access relevant health data found on CCM, including the services a child has received and who rendered the care.





# About Crimson Care Management (CCM)

- + The **Care Plan Overview** provides a quick snapshot of the child's available health information.
- + From here, users can navigate to further details of the available clinical history.

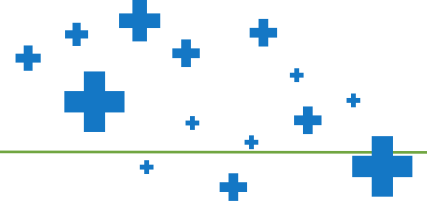


The screenshot displays the 'Care Plan Overview' for a patient named William Doe, born 11/28/1996, aged 17y 6m 22d. The patient's status is 'ACTIVE' with a 'Moderate risk' level, overridden on Jun 17, 2014. The interface is divided into several sections:

- Diagnoses:** Pain in joint, ankle and ...; Cough; Myopia; Unspecified prophylactic ...; Regular astigmatism; Sprain of ankle, unspecif...
- Medications:** Weekly Meds Checklist; ADDERALL XR; CEFDINIR; CLINDAMYCIN HCL; GUAIFENESIN; IBUPROFEN; METHYLPHENIDATE ER; METHYLPHENIDATE ER.
- Allergies:** Please enter allergy status.
- Insurance:** Primary - TennCareSelect; Eff. Start Date: 09/06/2013; End: 09/05/2014; Unknown.
- Procedures & Immunizations:**
  - [V2020] VISION SVCS FRAMES PURCHASES (date: 10/30/2013) with ICD9 Codes: [367.21,367.1]
  - [92340] FITTING SPECTACLES XCPT APHAKIA MONOFOCAL (date: 10/30/2013) with ICD9 Codes: [367.21,367.1]

The left sidebar shows patient details for 'Doe, William' and lists 'Care Managers' (none assigned) and 'Team Members' (Dr. John Smith SMITH, JOHN). It also lists 'Organizations' such as BCBST Office, Clinical Office, DCS Office, and DOH Office.





# Language Assistance

- + Are you letting language barriers stand between you, the patient and their care?
- + Language Access is critical.



**Over-the-Phone Interpreting**



**Personal Interpreter Service**



**LanguageU<sup>®</sup> Video Remote Interpreting**



**On-Site Interpreting**

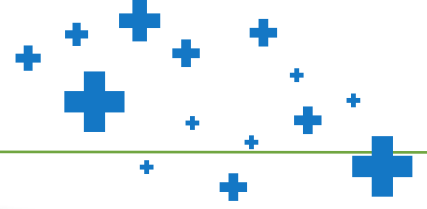


**LanguageLine Personal Interpreter App**

Region	English	Spanish	Other foreign language
Northeast	99.0%	0.8%	0.2%
East	97.1%	2.3%	0.6%
Southeast	97.5%	2.0%	0.5%
Middle	96.4%	2.8%	0.8%
West	97.1%	2.3%	0.6%

*15 other languages were primary for 25 or more members: Arabic, Vietnamese, Sign Language/ASL, Egyptian, Russian, Chinese, Ukrainian, Gujarati, Romanian, Swahili, Elamite, Edo, Estonian, French (incl. French Canadian), and Somali*

- + Visit [www.language.com](http://www.language.com) as well as our resource desk for more information

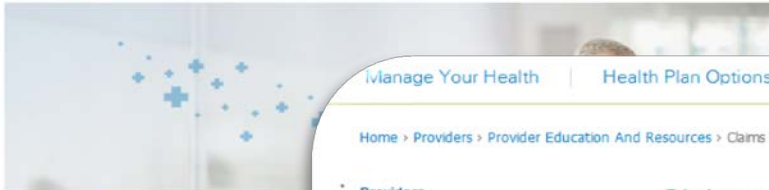


bluecare.bcbst.com

Manage Your Health | Health Plan Options | Members | Providers | Health Programs | About

Home > Providers > Electronic Data Interchange

## Electronic Data Interchange



BlueCross BlueShield of Tennessee is committed to meet the efficiency and information needs of healthcare professionals. Leveraging technology, we facilitate electronic claim transactions and much more.

- Providers
- Provider Administration Manual and Newsletters
- Regulations Guidance and Medicaid Audit Contractors
- Electronic Data Interchange**
- Provider Education and Resources
- Department of Children Services
- Vendor Relations

Manage Your Health | Health Plan Options | Members | Providers | Health Programs | About

Home > Providers > Provider Education And Resources > Claims Billing Information

## Claims Billing Information

Medicaid National Correct Coding Initiative (NCCI) Program

- Providers
- Provider Administration Manual and Newsletters
- Regulations Guidance and Medicaid Audit Contractors
- Electronic Data Interchange
- Provider Education and Resources
  - Claims Billing Information**
  - Programs, Services and Frequently Asked Questions
  - Clinical Practice Guidelines
  - Provider Forms
  - Training and Tools
  - BEHIP (Behaviorally Effective Healthcare in Pediatrics)
- Department of Children Services
- Vendor Relations

### Medicaid National Correct Coding Initiative (NCCI) Program

**Medicaid National Correct Coding Initiative (NCCI) Program:** implements NCCI methodologies in State Medicaid programs to reduce improper coding and inappropriate payment of Medicaid claims.

The National Correct Coding Initiative (NCCI) contains two types of edits:

- NCCI procedure-to-procedure (PTP) edits that define pairs of Healthcare Common Procedure Coding System (HCPCS) / Current Procedural Terminology (CPT) codes that should not be reported together for a variety of reasons. The purpose of the PTP edits is to prevent improper payments when incorrect code combinations are reported.
- Medically Unlikely Edits (MUEs) define for each HCPCS / CPT code the maximum units of service (UOS) that a provider would report under most circumstances for a single beneficiary on a single date of service.

The Medicaid NCCI program consists of six methodologies. These are:

- A methodology with PTP edits for practitioner and ambulatory surgical center (ASC) services.

Home > Providers > Provider Education And Resources

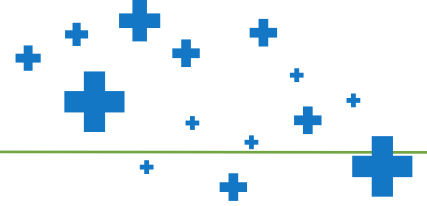
## Provider Education and Resources



BlueCare Tennessee recognizes that a multi-faceted strategy is necessary to support effective provider education. Our goal is to provide up-to-date information in a centralized location that will assist your office practice. In this section you will find claims billing instructions, TennCare program requirements, quick reference guides, specialized programs, frequently asked questions, helpful forms, tutorials, and toolkits.

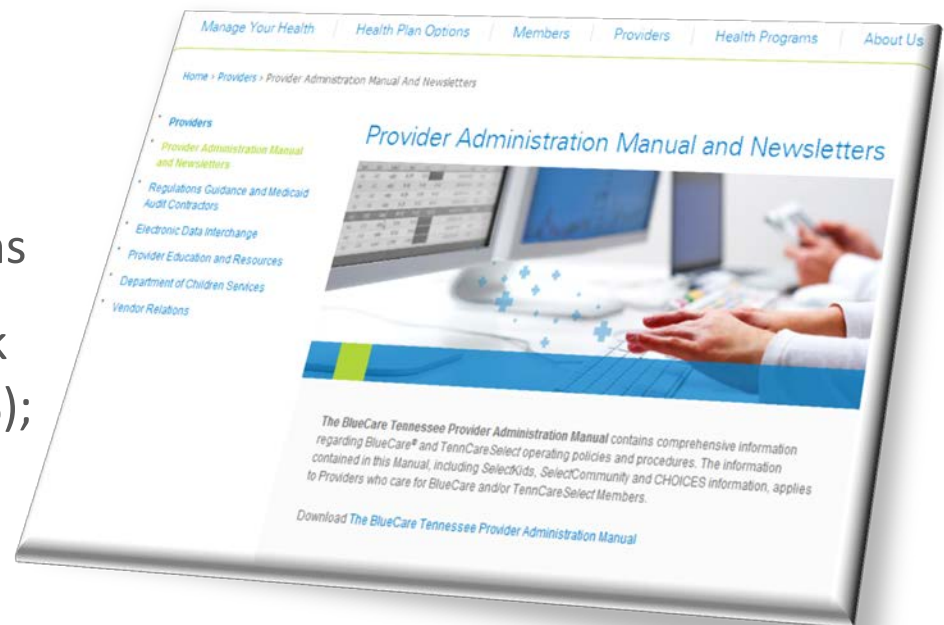
- Providers
- Provider Administration Manual and Newsletters
- Regulations Guidance and Medicaid Audit Contractors
- Electronic Data Interchange
- Provider Education and Resources**
  - Claims Billing Information
  - Programs, Services and Frequently Asked Questions
  - Clinical Practice Guidelines
  - Provider Forms
  - Training and Tools
- BEHIP (Behaviorally Effective Healthcare in Pediatrics)
- Department of Children Services
- Vendor Relations

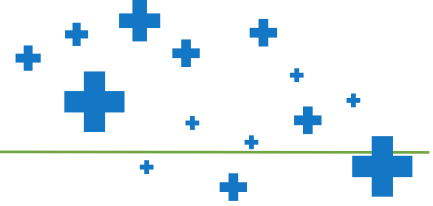




## WebTrends – For the month of June 2014

- + 10,078 visits to our site
- + 19.01% of the overall visits are for the Provider Page (2,939)
- + Most visited sections of the Provider Page – **Provider Education and Resources** as well as the **Provider Manual**
- + Forms most commonly accessed/downloaded: Prior Authorization Requests, DME Requests, and Disclosure Forms
- + **Monday** is the day of the week with the highest visits (24.76%); highest usage is between the hours of **10 to 3**



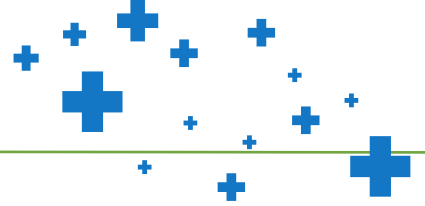


## Claims Billing Reminders

Appropriate Billing for Revenue Code 0360:

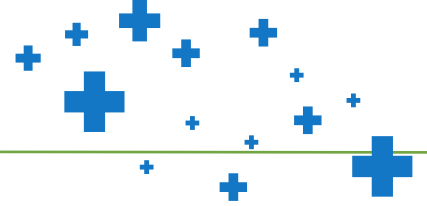
- + Procedures performed in the ER should be billed with revenue code 0450, while procedures performed for wound care should be billed with revenue code 0519.
- + The facility must also be contracted for wound care to bill for these services.

Additional information on wound care guidelines may be found in the provider administration manuals which are available on the Provider page our website, [www.bluecare.bcbst.com](http://www.bluecare.bcbst.com)



## Claims Billing Reminders

- + Rehabilitation Services / Modifier 59
- + Sterilization and Hysterectomy Forms
- + Timely Filing for Corrected Billings
  - + When it is discovered a claim was filed to BlueCare incorrectly, a corrected billing can be filed.
  - + The corrected billing must be received within 120 days from the date of the remittance.



## Questions?

- + Visit our website @ [bluecare.bcbst.com](http://bluecare.bcbst.com)
- + Call Provider Service Line for administrative issues
  - BlueCare 1-800-468-9736
  - *TennCareSelect* 1-800-276-1978
- + Call Utilization Management at 1-888-423-0131 for prior authorization
- + Visit our [BlueCare Tennessee](#) Resource Center