

March 2021

BlueBlastSM

News Providers Can Use



 **Healthy BlueSM**
BlueChoice® HealthPlan of SC

Healthy Connections 

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HEDIS Coding Tip – Nutrition Counseling and HEDIS Guidelines Clarification

Healthy Connections implemented a Nutritional Counseling Program in an effort to help reduce obesity rates in South Carolina and improve health outcomes. Please refer to the Healthy Connections website <https://www.scdhhs.gov/press-release/nutritional-counseling-bulletin> for the full article and explanation.

To view the full article, visit www.HealthyBlueSC.com and select **Providers**.

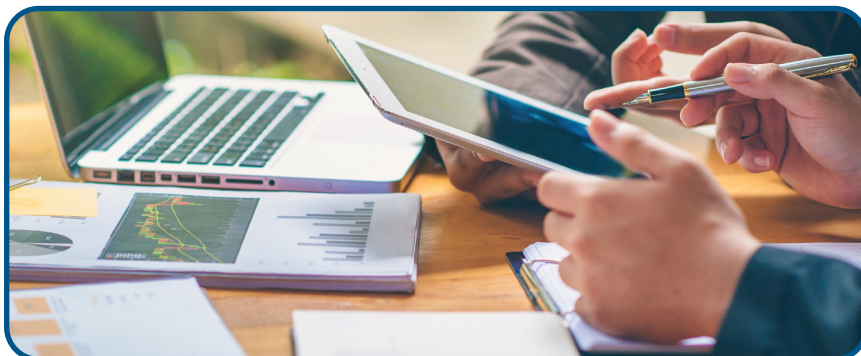


Code: 87428

To date, SCDHHS has not received Medicare pricing data for this code. SCDHHS would need a pricing reference, preferably Medicare pricing data, to establish a reasonable reimbursement on the code.

Code 87428, infectious agent antigen detection by immunoassay technique (for example, enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [ELISA], fluorescence immunoassay FIA, immunochemiluminometric assay [IMCA]) qualitative or semiquantitative; severe acute respiratory syndrome coronavirus (for example, SARS-CoV, SARSCoV-2 [COVID-19]).

We will keep you updated with any new information.



 fb.me/HealthyBlueSC

 [@CoachBlueSC](https://www.instagram.com/CoachBlueSC)

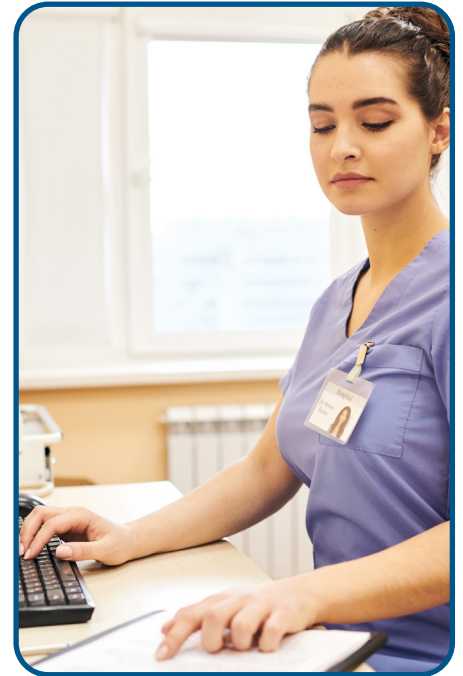
 [@HealthyBlueSC](https://twitter.com/HealthyBlueSC)

New Specialty Pharmacy Medical Step Therapy Requirements

Beginning April 1, 2021, the specialty pharmacy drugs and corresponding codes from current Clinical Criteria noted below will be included in our medical step therapy precertification review process. Step therapy review applies upon precertification initiation or renewal in addition to the current medical necessity review.

Clinical Criteria	Status	Drug(s)	HCPCS code
ING-CC-0011	Nonpreferred	Ocrevus®, injection, 1 mg	J2350
ING-CC-0160	Nonpreferred	Eptinezumab, injection 1 mg	J3032

To view the full article, visit www.HealthyBlueSC.com and select **Providers**.



ONCOLOGY

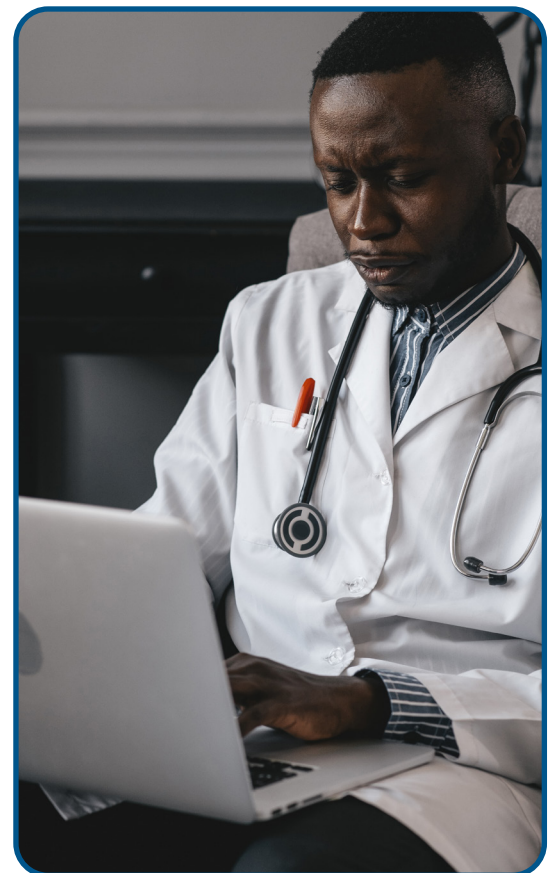
Prior Authorization Updates for Specialty Pharmacy

Beginning April 1, 2021, the following medical injectable codes from current or new Clinical Criteria documents will be included in our prior authorization review process.

Please note, inclusion of the National Drug Code (NDC) on your claim will help expedite claim processing of drugs billed with a Not Otherwise Classified (NOC) code.

To search for specific clinical criteria, visit www.HealthyBlueSC.com and select **Providers**.

Clinical Criteria	HCPCS or CPT® code(s)	Drug(s)
ING-CC-0164	J9281	Jelmyto (mitomycin)
ING-CC-0165	J9317	Trodely (sacituzumab Govitecan-hziy)
ING-CC-0061	J1950	Fensolvi (leuprolide acetate)



New Provider Enrollment Checklist

At Healthy Blue, we work with doctors, facilities and other health care professionals to bring our members quality, accessible and affordable health care. If you are a new provider wishing to enroll, please use this checklist to find forms and documents (including examples) to enroll. The list is broken down by specialty to make it easy for you to choose the specific forms you need. We look forward to teaming up with you!



CHECKLIST FOR INITIAL PROVIDER ENROLLMENT

Submit all documentation to Provider.Blue.Enroll@cbssc.com.

Use this checklist to determine which forms you need based on your specialty type. **Each checklist item is hyperlinked to forms or examples for your reference.** Note: Mid-levels include NP, PA, CRNA, CNM, CNS and hospital-based physicians. Ancillary includes speech, physical, occupational and audiology therapists.

Checklist Items	Mid-Level	Physician	DDS	DMD	Ancillary	Chiro
A Provider Enrollment Application	See Footnote 1			See Footnote 7		
B Registration Form for Mid-Level and Hospital-Based Providers						
C SC Dental Credentialing Application²						
D Copy of SC Medical/Practice License						
E DEA Certification⁴			See Footnote 3	See Footnote 3		
F Current Copy of Malpractice Insurance (Minimum \$1M/\$3M) (Must include the provider's name or a roster with the provider name to be valid.)						
G Authorization for Clinic/Group to Bill for Services⁵						
H Clinical Lab Improvement Amendments (CLIA) Form				See Footnote 7		
I NP Preceptor Form						
J Network Contracts (send in a request)						
K Hold Harmless for BlueChoice HealthPlan						
L Appendix D for BlueChoice HealthPlan						
Additional Items for Medicaid						
M Medicaid ID Number ⁶				See Footnote 7		
N Nurse Protocols						

¹If you are a mid-level provider who wants to be enrolled in our Medicaid network, fill out the Provider Enrollment Application.

²If the provider performs any routine dental services, the Dental Credentialing Application is needed.
³If applicable.

⁴Required for M.D.s, D.O.s, O.D.s, NPs and PAs.

⁵A copy is included in the Provider Enrollment Application.

⁶On the Provider Enrollment Application.

⁷Required when DMD is applying for medical networks.



Coding Spotlight: Overview Of The 2021 Evaluation And Management Changes

Why are these changes necessary?

Changes are meant to simplify code selection criteria, make coding more clinically relevant, and reduce documentation overload for office-based evaluation and management (E/M) services while continuing to differentiate payment based on complexity of care.

Key elements of major revisions for 2021:

- Physicians may choose their documentation based on **medical decision making (MDM)** or **total time** (including non-face-to-face services).

- History and exam are still important parts of the notes and may contribute to both time and MDM, but they will no longer be scored for determining the level of the E/M visit.
- MDM criteria have moved away from simply adding up tasks to instead focusing on tasks that affect the management of a patient's condition.
- Code 99201 was deleted.



Access To More Claim Denial Information Is Now Self-Service

Through predictive analytics, health care teams can now receive real-time solutions to claim denials.

Healthy Blue is committed to providing digital first solutions. Health care teams can now use self-service tools to reduce the amount of time spent following up on claim denials. **Through the application of predictive analytics, Healthy Blue has the answers before you ask the questions.** With an initial focus on claim-level insights, Healthy Blue has streamlined claim denial inquiries by making the reasons for the claim denial digitally available. In addition to the reason for the denial, we supply you with the next steps needed to move the claim to payment. This eliminates the need to call for updates or experience any unnecessary delays waiting for the EOP.

Access the Claims Status Listing on Payer Spaces by visiting www.HealthyBlueSC.com and selecting **Providers**.

Use the Log In button or the secure provider portal via **Availity**. We provide a complete list of claims, highlight those claims that have proactive insights, provide a reason for the denial, and include the information needed to move the claim forward. Predictive proactive issue resolution and near real-time digital claim denial information is another example of how Healthy Blue is using digital technology to improve the health care experience.

If you have questions, please reach out to your Provider Relations representative.

Providers should first log on to Availity, go to Payer Spaces and select Healthy Blue as the payer. The screenshot below shows the Claims Status Listing access noted in the communication.

The screenshot displays the Healthy Blue South Carolina Providers portal. At the top, there is a navigation bar with 'My Favorites', 'South Carolina', and 'Help &'. Below this, a secondary navigation bar includes 'My Providers', 'Reporting', 'Payer Spaces', and 'More'. The main content area starts with a 'Home > Healthy Blue South Carolina' breadcrumb. A large blue banner reads 'Welcome Healthy Blue South Carolina Providers' and 'Your One-Stop Shop!', followed by a sub-header 'Explore important proprietary information available in the Applications and Resources tabs.' Below the banner, there are three tabs: 'Applications', 'Resources', and 'News and Announcements'. A 'Sort By' dropdown menu is set to 'A-Z'. A disclaimer states: 'THESE LINKS MAY RE-DIRECT TO THIRD PARTY SITES AND ARE PROVIDED FOR YOUR CONVENIENCE ONLY. AVAILITY IS NOT RESPONSIBLE FOR THE CONTENT OR SECURITY OF ANY THIRD PARTY SITES AND DOES NOT ENDORSE ANY PRODUCTS OR SERVICES PROVIDED BY THIRD PARTIES!'. At the bottom, there are three cards: 'Access Your Custom Learning Center' (Find payer-centric training and resources in the learning center.), 'Chat with Payer' (Start a live chat), and 'Claims Status Listing' (Retrieve a list and status of the claims you've submitted).

Secondary Claims Training

We have received requests for assistance with filing secondary claims. Availity provides training on secondary claims.

- Go to [Availity.com](https://www.availity.com)
- Log in to Availity
- Select Help and Training
- Select Get Trained
- In the top Search box, type coordination of benefits
- You will find “Secondary and Tertiary Claims – Online course”

Secondary and Tertiary Claims - Online Course

Content **1 Modules**

Certificates of completion

Difficulty **Intermediate**

Course Length **15 mins**

Rating **14 Reviews**

Reviewer/Instructor **Availity Training***

For Availity Portal users with the Claims role, learn how to submit secondary and tertiary medical claims using web-entered claim forms. This course covers good basics about coordination of benefits (COB) and application how-to steps using Availity’s claim forms (new version).

We know everyone learns in different ways and has different needs around this topic. That’s why the course is flexible. Explore as much or as little as you need at any time.

Course length: Between 10 and 25 minutes (depending on your path and pace).

Course updated: Aug. 31, 2020

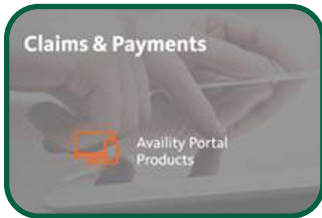


2021 Diaper Bank In Partnership With Prisma Health

Healthy Blue sponsored the 2021 Diaper Bank in partnership with Prisma Health. The first “Drive thru Diaper Day” was on Tuesday, Jan. 26 at Prisma Health in Greenville, South Carolina. The Diaper Bank provided service to more than 800 families with total of 38,500 diapers. A Healthy Blue Representative provided the mothers with a “Mommy Swag Bag” that included a face mask, burp cloth, rattle, baby organizer booklet, and benefits and services information. Families left feeling grateful and were looking forward to the next event in March.

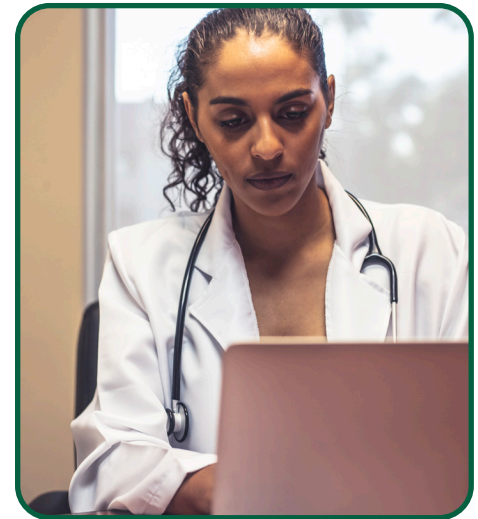
Appeals

We have learned that many providers were not aware they could submit appeals through Availity. This is a quick and convenient way to handle your appeals. Please refer to the Training Demo on the Availity website at Availity.com



Availity Appeals — Training Demo
 Content **1 Modules**
 Certificates of **completion**
 Difficulty **Basic**
 Course Length **7 mins**

Learn how to dispute a claim from a claim status result, add supporting documentation within a dispute request, view details of a dispute, request another review, and manage the Appeals worklist.



Provider Education Territory

We are excited to announce that Healthy Blue Provider Education representatives will now be servicing all lines of business. You will now have one point of contact for all of your Healthy Blue education needs. Please refer to the updated territory map. Education representatives will be communicating with providers in their assigned territories. Should you need assistance prior to them reaching out to you, please contact them using the phone numbers or email addresses provided here.

Provider Education Territory Map

BlueCross BlueShield of South Carolina and BlueChoice HealthPlan of South Carolina

Tiffany Ashford
 Tiffany.Ashford@bcbsc.com
 (803) 264-8716

Michaelia Johnson
 Michaelia.Johnson@bcbsc.com
 (803) 264-8748

Tammy Jones
 Tammy.Jones@bcbsc.com
 (803) 264-4875

Tracy Brown
 Tracy.Brown@bcbsc.com
 (803) 264-3164

Ke-Onna Davis
 Ke-Onna.Davis@bcbsc.com
 (803) 264-0879

Bunny Temple
 Bunny.Temple@bluechoicesc.com
 (803) 264-2361

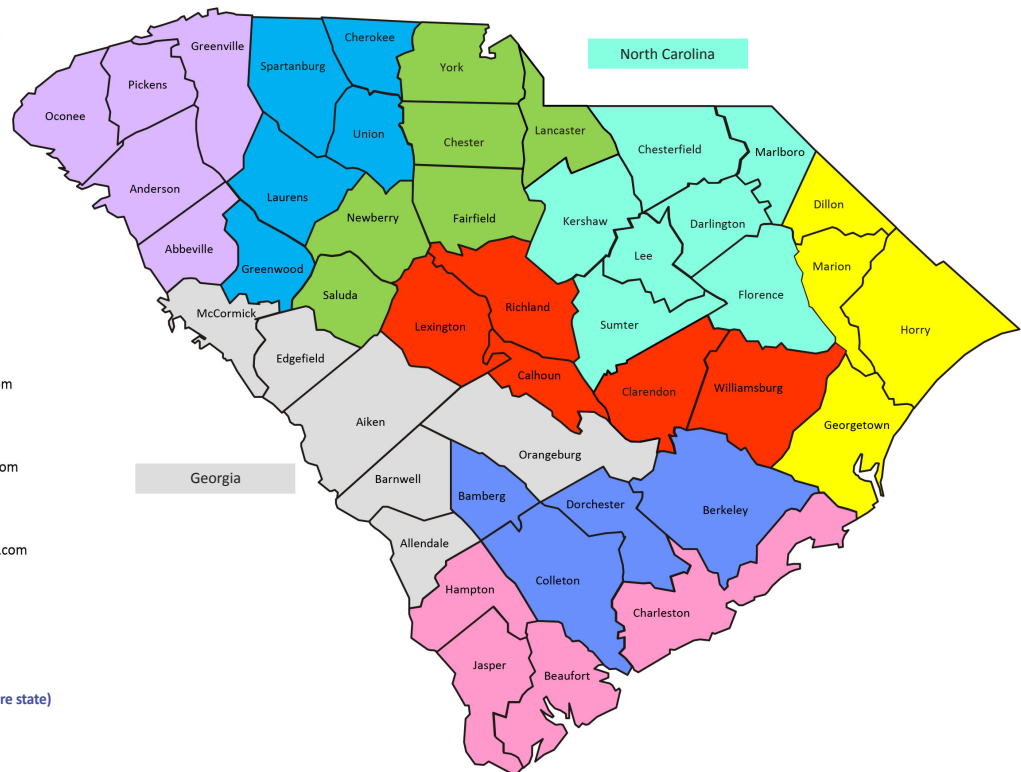
Tom Ingram
 Thomas.Ingram@bluechoicesc.com
 (803) 382-5778

Donese Pinckney
 Donese.Pinckney@bluechoicesc.com
 (803) 382-5125

Antoinette Jenkins
 Antoinette.Jenkins@bcbsc.com
 (803) 264-9252

Rikkia Kohn | Behavioral Health (entire state)
 Rikkia.G.Kohn@bluechoicesc.com
 (803) 264-2954

Fancy Crayton | CIMS/FQHCs (entire state)
 Fancy.Crayton@bluechoicesc.com
 (803) 264-3196





BlueChoice HealthPlan is an independent licensee of the Blue Cross and Blue Shield Association. BlueChoice HealthPlan has contracted with Amerigroup Partnership Plan, LLC, an independent company, for services to support administration of Healthy Connections. BlueChoice HealthPlan is an independent licensee of the Blue Cross and Blue Shield Association. Amerigroup Corporation, an independent company, administers utilization management services for BlueChoice HealthPlan.

Avality, LLC is an independent company providing administrative support services on behalf of Healthy Blue.

Some links in this newsletter lead to third-party sites. Those organizations are solely responsible for the content and privacy policies on these sites.

The codes listed are for informational purposes only and are not intended to suggest or guide reimbursement. If applicable, refer to your provider contract or health plan contact for reimbursement information.

To report fraud, call our confidential Fraud Hotline at 877-725-2702. You may also call the South Carolina Department of Health and Human Services Fraud Hotline at 888-364-3224 or email fraudres@scdhhs.gov.