



Blue Medicare PPO Quick Reference Guide

Major Characteristics	Benefits, Eligibility or Claims Status	Correspondence & Claim Disputes	Preauthorization	Laboratory & Radiology Services	Behavioral Health Services						
<ul style="list-style-type: none"> Blue Medicare PPO Participating Providers may only collect for copayments, cost share (coinsurance) and deductibles, if applicable. To receive in-network benefits, Blue Medicare PPO Members must receive medical care from Blue Medicare PPO Participating Physicians/Professional Providers (see below for referral information) and/or Blue Medicare PPO Participating Facilities (no referrals required). Referrals are not required if Blue Medicare PPO Members receive medical care from Blue Medicare PPO Participating Physicians/Professional Providers. NOTE: Blue Medicare PPO Members may self-refer to Blue Medicare PPO Participating Specialty Care Physicians/Professional Providers. For Blue Medicare PPO Members to receive in-network benefits, referrals to out-of-network physicians/professional providers which are necessary due to network inadequacy or continuity of care must be authorized by the Utilization Management (UM) Department prior to the services being rendered. BlueCard does not apply to Blue Medicare PPO. However, if a Texas Blue Medicare PPO Member sees a New Mexico Blue Medicare PPO physician/professional provider, the claim will process at the in-network benefit level. Similarly, if a New Mexico Blue Medicare PPO Member sees a Texas Blue Medicare PPO physician/professional provider, the claim will process at the in-network benefit level. 	<ul style="list-style-type: none"> To check benefits, eligibility or claims status, call Blue Medicare PPO Provider Customer Service: 1-866-706-7745 Blue Medicare PPO Participating Physicians/Professional Providers should submit Blue Medicare PPO claims electronically to Blue Medicare PPO. Blue Medicare PPO Electronic Payor ID #: NMPPO Blue Medicare PPO Participating Facilities should submit Blue Medicare PPO claims electronically to Blue Medicare PPO. Blue Medicare PPO Electronic Payor ID #: NMPPO If the Physician/Professional Provider or Facility must file a paper claim, mail claim to: Blue Medicare PPO P.O. Box 3567 Scranton, PA 18505 Blue Medicare PPO claims must be submitted within 180 days of the date of service. Claims that are not submitted within 180 days from the date of service are not eligible for reimbursement. Blue Medicare PPO Participating Providers may not seek payment from the Member for claims submitted after the 180 day filing deadline. 	<p>Correspondence</p> <ul style="list-style-type: none"> All correspondence should be sent to: Blue Medicare PPO P.O. Box 3567 Scranton, PA 18505 <p>Claim Disputes</p> <ul style="list-style-type: none"> For a claim dispute, call Blue Medicare PPO Provider Customer Service at: 1-866-706-7745 	<p>Preauthorization</p> <ul style="list-style-type: none"> Current listings of Blue Medicare PPO Participating Physicians/Professional Providers and Facilities in the Blue Medicare PPO Provider Directory. For Case Management Programs, call: 1-866-252-8107 For Disease Management Programs, call: 1-866-252-8106 For the Utilization Management (UM) Department, call: 1-800-325-8334 For preauthorization call: 1-800-325-8334 For detailed information, access the <i>BCBSNM Blues Provider Reference Manual</i> and the Blue Medicare PPO Supplement on-line at www.bcbsnm.com (for the <i>Blues Provider Reference Manual</i>, select Information for Providers, then go to the Provider Library and click on "Provider Reference Manual"; for access to the Blue Medicare PPO Supplement, select "Information for Providers," then click on the link for "Blue Medicare PPO"). 	<p>Laboratory & Radiology Services</p> <p>Laboratory Services</p> <ul style="list-style-type: none"> Participating clinical labs include: <table border="1" style="margin-left: 40px; border-collapse: collapse;"> <tr> <td style="padding: 2px;">Quest</td> <td style="padding: 2px;">1-800-232-3766</td> </tr> <tr> <td style="padding: 2px;">SED</td> <td style="padding: 2px;">1-800-999-5227</td> </tr> <tr> <td style="padding: 2px;">Tricare</td> <td style="padding: 2px;">1-800-245-3296</td> </tr> </table> If lab services are performed at the Participating Physician's/Professional Provider's office, the Physician/Professional Provider may bill for the lab services. However, if the Physician's/Professional Provider's office sends the lab specimens to a contracted lab for completion, only the contracted lab can bill Blue Medicare PPO for the lab services. <p>Radiology Services</p> <ul style="list-style-type: none"> American Imaging Management, Inc. (AIM) is responsible for managing outpatient, non-emergency diagnostic high tech imaging services for Blue Medicare PPO Members. The ordering Physician/Professional Provider must contact AIM to obtain an RQI number for the outpatient, non-emergency diagnostic high tech imaging services listed below when performed in a Physician's/Professional Provider's office, outpatient department of a hospital or a freestanding imaging center: <ul style="list-style-type: none"> CT Scans MRA Scans MRI Scans Nuclear Cardiology Studies PET Scans <p><small>NOTE: Whether the services are Medically Necessary must be determined before an RQI number will be issued. Claims received that do not have an RQI number may be denied. Blue Medicare PPO Physicians/Professional Providers may not seek payment from the Member when a claim is denied for lack of an RQI number.</small></p> <ul style="list-style-type: none"> To obtain an RQI number, contact AIM as follows: Call Center: 1-866-745-1789 Internet: www.americanimaging.net Fax: 1-800-610-0050 For a listing of imaging provider locations, contact AIM at 1-866-745-1789, or go to www.americanimaging.net 	Quest	1-800-232-3766	SED	1-800-999-5227	Tricare	1-800-245-3296	<p>Behavioral Health Services</p> <ul style="list-style-type: none"> Mesa Mental Health coordinates the Behavioral Health (mental health & chemical dependency) Services for Blue Medicare PPO Members. All Behavioral Health Services must be preauthorized by Mesa Mental Health (NOTE: Whether the services are Medically Necessary must be determined before an authorization number will be issued. Claims that are received that do not have an authorization number will be denied. Blue Medicare PPO Physicians/Professional Providers may not seek payment from the Member when a claim is denied for lack of a preauthorization number.) Members requiring Behavioral Health Services are required to call Mesa Mental Health. The call to preauthorize Behavioral Health Services can be made by the Member's Participating Physician/Professional Provider. Preauthorization must be obtained prior to the delivery of inpatient and outpatient Behavioral Health Services. To obtain preauthorization, call Mesa Mental Health at: 1-800-583-6372 To obtain benefits and eligibility, or for claims processing questions or status, call Blue Medicare PPO Provider Customer Service at: 1-866-706-7745 Blue Medicare PPO claims should be submitted electronically to Blue Medicare PPO. Blue Medicare PPO Electronic Payor ID # for Physicians/Professional & Facility Providers: NMPPO If the Behavioral Health professional must file a paper claim, mail claim to: Blue Medicare PPO P.O. Box 3567 Scranton, PA 18505
Quest	1-800-232-3766										
SED	1-800-999-5227										
Tricare	1-800-245-3296										

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Additional Information Page

Claims Submission/Claim Disputes:

- Blue Medicare PPO claims must be submitted within **180** days of the date of service. Claims that are not submitted within **180** days from the date of service are not eligible for reimbursement. Blue Medicare PPO Participating Physicians/Professional Providers and Facilities may not seek payment from the Member for claims submitted after the **180** day filing deadline. Blue Medicare PPO claims should be submitted electronically to Blue Medicare PPO. The Electronic Payor ID for Blue Medicare PPO for Physicians/Professional Providers is **NMPPO**. The Electronic Payor ID for Blue Medicare PPO Facilities is **NMPPO**. Contact The Availity Health Information Network at **1-877-334-8446** for information on electronic filing.
- Blue Medicare PPO paper claims must be submitted on the Standard CMS-1500 (Version 08/05, Physician/Professional Provider) or CMS-1450 (UB04 - Facility) claim form to **Blue Medicare PPO, P.O. Box 3567, Scranton, PA 18505**.
- Blue Medicare PPO claims must be filed with the Member's complete ID number – exactly as shown on the Member's ID card including the 3-digit alpha prefix - **YID**.
- Blue Medicare PPO duplicate claims may not be submitted prior to the applicable 30-day (electronic) or 45-day (paper) claims payment period.
- For Claim Disputes, contact Blue Medicare PPO Provider Customer Service at **1-866-706-7745**.

Blue Medicare PPO Participating Physicians/Professional Providers are encouraged to do the following:

- Ask for the Member's ID card at the time of each office visit;
- Copy both sides of the Member's ID card and keep the copy with the patient's file;
- Call the toll-free Blue Medicare PPO Provider Customer Service number indicated on the Member's ID card or as listed on the previous page to:
 - check benefits and eligibility
 - inquire about claim status or a claim problem
- Call one of the toll-free numbers listed on the previous page for the following:
 - to obtain preauthorizations,
 - to contact Case Management/Disease Management Programs, or
 - to notify Blue Medicare PPO within one (1) business day of an emergency hospital admission
- In-Network benefits for an out-of-network provider due to extenuating circumstances such as network inadequacy or continuity of care must be preauthorized by UM. Please call the UM Department directly at 1-800-325-8334.
- For detailed information, access the *BCBSNM Blues Provider Reference Manual* and the Blue Medicare PPO Supplement on-line at www.bcbsnm.com (for the *Blues Provider Reference Manual*, select Information for Providers, then go to the Provider Library and click on "Provider Reference Manual"; for access to the Blue Medicare PPO Supplement, select "Information for Providers," then click on the link for "Blue Medicare PPO").

NPI & Network Effective Dates:

- A minimum of 30 days advance notice is required when making changes affecting the Physician's/Professional Provider's or Facility's BCBSNM status, especially in the following areas:
 - (1) Physical address (primary, secondary, tertiary); (2) Billing address; (3) Tax Identification Number and Social Security Number changes; (4) Moving from Group to Solo practice; (5) Moving from Solo to Group practice; (6) Moving from Group to Group practice; and (7) Backup/covering Physicians/Professional Providers.
- Physician/Professional and Facility-effective dates will be established as of the date the complete applications are received in the BCBSNM corporate office. This applies to additions, changes and cancellations.
- BCBSNM will not add, change or cancel information related to the provider record on a retroactive basis.
- Retroactive network participation will not be issued.
- To obtain an application for participation, please contact the BCBSNM Network Services Department at (505) 837-8800, or 1-800-567-8540.

Laboratory Services:

- Quest, SED, and Tricare are the **participating** labs for outpatient clinical reference laboratory services.
- Pick-up service is available to your office by calling: Quest, 1-800-232-3766; SED, 1-800-999-5227; or Tricare, 1-800-245-3296.
- Draw stations sites for Quest, SED, and Tricare are located throughout New Mexico. Please check our Web site (www.bcbsnm.com) for an up-to-date listing of all sites.
- If lab services are performed at the participating Blue Medicare PPO Physician's/Professional Provider's office, the Physician/Professional Provider may bill for the lab services. However, if the Physician's/Professional Provider's office sends the lab specimens to a contracted lab for completion, only the contracted lab can bill Blue Medicare PPO for the lab services.

Radiology Services – Outpatient, Non-Emergency Diagnostic High Tech Imaging Services:

- Ordering Physicians/Professional Providers must write the RQI number on the requisition for the imaging study.
- Hospitals and freestanding imaging centers that perform the imaging services cannot obtain an RQI number.
- Hospitals and freestanding imaging centers may confirm that an RQI number has been issued by accessing AIM's interactive Web site at www.americanimaging.net.
- For a more detailed *Physician's Guide to RQI*, go to www.bcbsnm.com (click on "Information for Providers").
- For routine radiology services that are not part of the RQI process above, refer to the *BCBSNM Blues Provider Reference Manual* on-line at www.bcbsnm.com (select "Information for Providers," then go to the Provider Library and click on "Provider Reference Manual").

Behavioral Health (Mental Health & Chemical Dependency) Services:

- To obtain preauthorization call Mesa Mental Health at **1-800-583-6372**. Telephone access is available 24 hours a day, 7 days a week.
- Customer Service Representatives and Care Managers at Mesa Mental Health will provide the following:
 - Preauthorization for inpatient and outpatient care
 - Referral services, if required
 - Case management
 - Assistance to the Member in the selection of a Participating Physician/Professional Provider
 - Crisis interventions
- Participating Physicians/Professional Providers are encouraged to admit patients to a Participating Facility unless an emergency situation exists that precludes safe access to a Participating Facility or if the admission is approved for non-participating facility. The Member will only receive in-network benefits when services are performed at a participating Blue Medicare PPO Facility.

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