

Virtual CMS and Navajo Nation I/T/U Training

MAY 11, 2021

# Agenda

- Overview of Blue Cross Community Centennial<sup>SM</sup>
- Value Added Services
- Transportation
- Care Coordination
- Home & Community-Based Services
- Prior Authorization & Claims
- Contacts



## Standard Medicaid Benefits ID Card

# The front of the card contains:

- Member name
- > ID number
- Benefit information

# The back of the card contains:

- Important phone numbers to coordinate services
- Prior authorization request instructions





BlueCross BlueShield of New Mexico

Subscriber Name:

<FNAME M LNAME>

Identification No: YIF<SBSB ID>

Group Number: N72100

Date of Birth: <MEME BIRTH DT>

Enrollment Effective Date: <MEIA REO DT> URGENT CARE

Medicaid ID: <12345678910>

RxBin: 011552 RxPCN: SALUD

#### Blue Cross Community Centennial\*

A Centennial Care Plan

PCP:

<PRPR NAME> <PRAD PHONE>

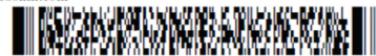
OFFICE VISIT EMERGENCY ROOM HOSPITAL



\*You may be billed <\$XXX> for non emergency use of the ER.



#### bcbsnm.com





BlueCross BlueShield of New Mexico

For care received in/outside of NM: BCBSNM Claims Dept

PO Box 27838

Albuquerque NM 87125-7838.

Prior authorization required for some in-network and most out-of-network services. Special Beginnings® members must call in the first Trimester of pregnancy. For emergencies, call 911 or go to the closest emergency room. After treatment call your PCP.

PRIME

\*Group contracts directly

Customer Service

Special Beginnings 24/7 Nurseline

Blue Cross Blue Shield of New Mexico, a Division of Health Care Service Corporation, a Mutual Legal Reserve Company, an Independent Licensee of the Blue Cross Blue Shield Association

ReserveTransport\* 1-866-913-4342

Pharmacy Benefits Manager

# Alternative Benefit Plan

There are two kinds of ABP recipients:

## **ABP Recipient**

The recipient is considered to be in COE 100 but does not meet medically frail criteria.

# **ABP Exempt**

The recipient is considered to be in COE 100 but meets medically frail criteria. ABP Exempt recipients have access to full Medicaid benefits including long-term services and supports for individuals who qualify based on need.

# ABP Exempt Qualifications

Qualifying conditions for ABP Exempt may include being medically frail, blind, disabled, terminally ill and in hospice, or pregnant.

# Examples of medically frail conditions:

- Cancer (current diagnosis/ treatment or occurred within five years)
- Chronic Substance Use Disorder
- Diabetes (insulin-dependent)
- Hepatitis C (active)

- Malignant Tumor (if treated/ occurred within previous five years)
- Needing Assistance with One Activity of Daily Living (ADL)
- Parkinson's Disease
- Stroke (CVA)

There are more than 50 conditions included on the Medically Frail Conditions List. Please let us know if you would like a copy of the list.



# Value-Added Services

# Physical Health Value-Added Services

Value-Added Service	Applies To	Members on Standard Medicaid Plan	Members on Alternative Benefit Plan (ABP)	Members on ABP Exempt Plan	Prior Authorization Required for Value-Added Service?
Home Meal Delivery	Members who are transitioning from a nursing facility into the community	✓	✓	✓	No
Native American Traditional Healing and Wellness	Native American members	✓	✓	✓	No
Remote Monitoring Program	Members with chronic conditions	✓	✓	✓	Member must participate in the Paramedicine Program; requires an assessment for need
Respite Bed	Certain members discharging from an emergency room or hospital	✓	✓	✓	Yes

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# Maternity Value-Added Services

Value-Added Service	Applies To	Members on Standard Medicaid Plan	Members on Alternative Benefit Plan (ABP)	Members on ABP Exempt Plan	Prior Authorization Required for Value-Added Service?
Full Medicaid Benefits for Pregnant Women in COEs 301 and 035 (full benefits including dental, vision, prescription drugs, and behavioral health)	Certain pregnant members	✓	Not a value-added service; standard ABP benefits Apply	Not a value-added service; standard ABP benefits apply	Only if a particular service should require one
Infant Car Seat*#	Pregnant members	✓	✓	<b>√</b>	Yes
Portable Infant Crib*^#	Pregnant members	✓	✓	✓	Yes
Prenatal Education (in person)* Prenatal Education (online)*^	Pregnant members	✓	✓	✓	No
*Must participate in BCBSNM's Care Coordina  ^Must join the Safe Sleep program to redeem		†Must complete postpartum follow-up appointment to redeem #Must complete prenatal visit requirements to redeem			

# Behavioral Health Value-Added Services

Value-Added Service	Applies To	Members on Standard Medicaid Plan	Members on Alternative Benefit Plan (ABP)	Members on ABP Exempt Plan	Prior Authorization Required for Value-Added Service?
Electroconvulsive Therapy (ECT) (treatment for psychiatric conditions)	Members who meet standard ECT medical necessity criteria	✓	Not a value- added service; standard ABP benefits apply	Not a value- added service; standard benefits apply	Yes
Transitional Living for Chemically Dependent/Psychiatrically Impaired Adults 18 Years Old or Older	Members enrolled in outpatient substance abuse center or in active treatment for psychiatric issues	✓	✓	✓	Yes
Wellness/Drop-in Centers and Family Support Centers	Medicaid members	✓	✓	✓	No

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#### **Traditional Medicine Benefit**

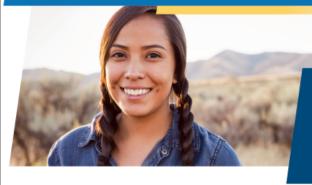
- Native American Blue Cross Community Centennial members are eligible to receive a grant for services provided by a traditional healer.
- Request the Traditional
   Medicine Benefit by calling 1-877-232-5518 (TTY: 711).
- See the Traditional Medicine Benefit flyer to get details on how to apply.





Blue Cross Community Centennial\*\*

#### Traditional Medicine Benefit



Native American Blue Cross Community Centennial members are eligible to receive a grant for services provided by a Traditional Healer.

#### How it works:

- Call 1-877-232-5518 to request the Traditional Medicine Benefit.
   If you are speech- or hearing-impaired, call 711 for TTY service.
- Blue Cross and Blue Shield of New Mexico (BCBSNM) will verify your information with minimal disruption to traditional practices and privacy.
- Eligible members will be sent a check for \$250 for traditional healing services.
- The Traditional Medicine Benefit is available one time per calendar year.
- · Completion of a Health Risk Assessment (HRA) is required.
- Use of the Traditional Medicine Benefit for any other purpose may be considered fraud, waste, or abuse.

Do you need this document in another language?

Or do you need to speak with someone who can translate the information for you?

If so, please call Member Services toll-free at 1-866-689-1523. Members with hearing or speech loss can call the TTY/TDD line at 711.

bcbsnm.com/medicaid

Such services are funded in part with the State of New Mexico.

Blue Cross and Blue Shield of New Mexico, a Division of Health Care Service Corporation, a Mutual Legal Reserve Company, an Independent Licensee of the Blue Cross and Blue Shield Association

478777.0720



Provided by ModivCare (formerly LogistiCare)

# Non-Emergency Transportation

### **Covered Services**

- Ride to routine appointments
- Ride to behavioral health appointments
- Mass transit (when prior approved)
- Mileage reimbursement (when prior approved)
- Meals (when prior approved)
- Lodging (when prior approved)



#### **Not Covered**

- Transportation to a pharmacy to get or drop off prescriptions
- ➤ Transportation to a medical supply store to get medical supplies or durable medical equipment
- Transportation for non-medical needs
- ➤ Transportation to a provider who is 65 miles or farther away from where you live (unless prior approved by BCBSNM)
- ➤ Transportation to a provider who is outside BCBSNM's network of contracted providers (unless prior approved by BCBSNM)



# **Care Coordination**

# **Care Coordination**

Member is enrolled with Blue Cross Community Centennial

Care Coordinator goes to a member's home to complete face-to-face assessment Types of Care Coordination: physical health, behavioral health, and long-term care

Health Risk Assessment (HRA) is completed via phone

\*Level 2 & 3 members are assigned to a Care Coordinator; however, any member may request care coordination Based on HRA, member may then receive a Comprehensive Needs Assessment (CNA) to determine Level of Care (2 or 3)



# **Prior Authorization**

Unless otherwise prohibited by law, prior authorizations are required for certain services before they are rendered. Prior authorizations are based on:

- Benefits and medical necessity
- Nationally recognized, peer-reviewed, evidence-based criteria
- New Mexico Administrative Code (NMAC)
- Other nationally recognized medically necessary care guidelines
- Long-Term Supports and Services (LTSS) have different prior authorization requirements.
- Native Americans are exempt from the prior authorization process when utilizing Indian Health Service, Tribal or Urban Indian (I/T/U) facilities.

## Claims Submission

### **Electronic Submission**

- Payer ID MC721-effective 05/20/17
- For information on electronic filing of claims, contact Availity at 1-800-282-4548

# **Duplicate Claims**

 Verify claims receipt with BCBSNM prior to resubmitting to prevent denials

# **Paper Submission**

 Must be submitted on the CMS-1500 or CMS-1450(UB-04) claim form

### **Submit forms to:**

Blue Cross Community Centennial

PO Box 27838

Albuquerque, NM 87125

## ITU Claims and Reimbursement

For I.H.S and Tribal 638 facilities, most outpatient services are paid at the Office of Management and Budget (OMB) Rate, using the UB04 claim form and one of the following revenue codes:

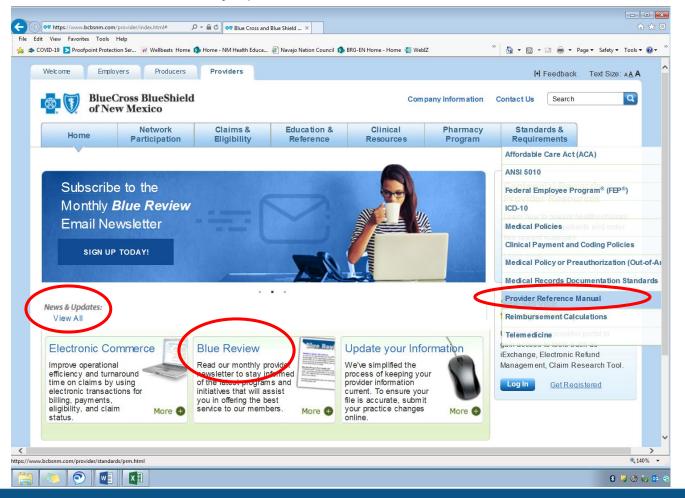
- (0512) dental clinic/dental service
- (0519) Physical health clinic/and all other services
- (0919) Behavioral Health practitioner service

Select services are not part of the OMB rate and are billed on the CMS 1500 form and paid at regular fee schedule rates.

### Additional Provider Resources

Providers can access additional information at <a href="https://www.bcbsnm.com/provider/index.html">https://www.bcbsnm.com/provider/index.html</a>

- Provider Reference Manual (Blue Cross Community Centennial)
- News & Updates Get the latest information from BCBSNM
- Blue Review Monthly updates



# **Contact Information**

#### **Tribal Liaisons**

Julia Platero, Community Outreach Specialist, Tribal Liaison,

Office: 505-816-2131 / Cell: 505-508-9030

Email: Julia\_Platero@bcbsnm.com

Winona Gishal, Community Outreach Specialist, Tribal Liaison

Office: 505-816-2116 / Cell: 505-604-7047

Email: Winona\_Gishal@bcbsnm.com

Bonnie Vallo, Tribal Affairs Specialist, Community Outreach

Office: 505-816-2210 / Cell: 505-999-0379

Email: Bonnie Vallo@bcbsnm.com



#### **Group Benefit Specialist** – Blue Cross Community Centennial Claims

David Hall & David Romine / Email: GBSCenntenialCareInquiries@bcbsnm.com

#### **Provider Network**

Cassandra Romero, Provider Relations Representative
 Email: Cassandra Romero@bcbsnm.com