

# BLUE REVIEW

September 2022

# **News & Updates**

#### **COVID-19 Information for Providers**

Please check the following Blue Cross and Blue Shield of New Mexico (BCBSNM) resources frequently for updates to important information related to COVID-19:

- Provider Information on COVID-19 Coverage
- BCBSNM News and Updates
- BCBSNM COVID-19 Member Website

# Pharmacy Program Updates: Quarterly Pharmacy Changes Effective July 1, 2022 — Part 2

Based on the availability of new prescription medications and Prime's National Pharmacy and Therapeutics Committee's review of changes in the pharmaceuticals market, some additions or drugs moving to a lower out-of-pocket payment level, revisions (drugs still covered but moved to a higher out-of-pocket payment level) and/or exclusions (drugs no longer covered) were made to the BCBSNM drug lists. Your patient(s) may ask you about therapeutic or lower cost alternatives if their medication is affected by one of these changes.

View the Pharmacy Program Updates effective as of July 1, 2022

# Pharmacy Program Updates: Quarterly Pharmacy Changes Effective Oct. 1, 2022 — Part 1

Based on the availability of new prescription medications and Prime's National Pharmacy and Therapeutics Committee's review of changes in the pharmaceuticals market, some additions or drugs moving to a lower out-of-pocket payment level, revisions (drugs still covered but moved to a

higher out-of-pocket payment level) and/or exclusions (drugs no longer covered) were made to the BCBSNM drug lists. Your patient(s) may ask you about therapeutic or lower cost alternatives if their medication is affected by one of these changes.

View the Pharmacy Program Updates effective as of Oct. 1, 2022

# Coming Soon: IVR System to Offer Prior Authorization Requests for FEP® Members

Coming soon you will be able to use the IVR system for prior authorization requests for FEP Members.

Read More

#### Webinars on Cross-Cultural Care Offer Continuing Education Credit

BCBSNM is offering courses for continuing education credits. These webinars are at no cost through Quality Interactions, a separate company that provides cultural awareness training to health care professionals.

Read More

#### **Rehoboth McKinley Christian Suspending Labor & Delivery Services**

Rehoboth McKinley Christian Healthcare Services will temporarily close its Labor & Delivery Unit effective Aug. 3, 2022. The hospital has advised that this closure is temporary and they plan to reopen when they're able to treat members with a full staff.

In the meantime, providers in McKinley County and surrounding areas may see an influx of members needing pre-natal or delivery services.

Blue Cross and Blue Shield of New Mexico will post updates on our News & Updates website.

## **Updates made to the Provider Reference Manual**

The BCBSNM Provider Reference Manual (PRM) has been updated, effective October 2, 2022.

Changes to the PRM include, but are not limited to, the following sections:

- 11 Utilization, Case, Population Health, and Condition & Lifestyle Management
   11.1.2 Accessibility
- The updated PRM is available on the <u>Provider Reference Manual</u> webpage at <u>bcbsnm.com/provider</u>. BCBSNM reminds providers to review the PRM for all changes.

# **Delivering Quality Care**

#### **Avoiding Antibiotics for Acute Bronchitis and Other Viruses**

With the start of flu and cold season, we encourage you to talk with our members about taking antibiotics only when needed. Antibiotics don't work against viruses, which are often the cause of acute bronchitis, colds and flu. They only treat certain bacterial infections.

**Read More** 

#### **Are You Using These Shared Decision-Making Aids?**

These evidence-based aids provide information about treatment options, lifestyle changes and outcomes. They don't replace your guidance but can help your conversations with patients.

**Read More** 

## **Help Close Diabetes Disparity Gaps**

Diabetes is one of the most common chronic conditions in the U.S. According to the Centers for Disease Control and Prevention (CDC), more than 37 million Americans of all ages have diabetes. An estimated 96 million Americans have prediabetes or are at high risk for type 2 diabetes.

Read More

# **Verify Your Directory Details Every 90 Days**

As a reminder, the Consolidated Appropriations Act (CAA) of 2021 requires that certain directory information be verified every 90 days. It must be verified every 90 days even if your data hasn't changed since you last verified it.

Read More

#### Videos to Share on Behavioral Health Care

We created short videos for our members about behavioral health care and support. We're making them available to you to show to patients in your waiting rooms, or to share the links in your patient portals or discharge paperwork.

**Read More** 

# **Coding and Claims**

## Reminders When Using the Claims Inquiry Resolution (CIR) Tool

As an alternative to phone calls or faxing forms, you can use the CIR tool via Availity<sup>®</sup> Essentials to submit claim reconsideration requests online for certain finalized claims. As a reminder, the CIR tool is in our BCBSNM-branded Payer Spaces section at Availity.com.

<u>Read More</u>

# Blue Cross Medicare Advantagess (Medicare)

## Help Close Gaps in Care for Group Medicare Advantage Members

If we need medical records for Blue Cross Group Medicare Advantage (PPO)<sup>™</sup> members, you will receive requests only from BCBSNM or our vendor, Change Healthcare. This is part of the Blue Cross and Blue Shield (BCBS) National Coordination of Care program so that you won't receive requests from multiple BCBS plans or their vendors.

**Read More** 

# Reviews on Inpatient DRG Claims for BlueCard® (Out of Area) Medicare Advantage Members

The Blue Cross and Blue Shield Association requires all host BCBS Plans to review select inpatient, diagnosis-related group (DRG) claims for any out-of-area Blue Cross Medicare Advantage members. Beginning Oct. 15, 2022, BCBSNM will work with EXL Health (EXL) to complete these reviews. The review will check for compliance with ICD-10 procedure coding system guidelines.

<u>Read More</u>

# Blue Cross Community Centennial (Medicaid)

Use Our New Prior Authorization Digital Lookup Tool for Medicaid Member Information

You may be familiar with some of the Medicaid prior authorization resources on our Provider website. These include prior authorization code lists with effective dates and related information for Blue Cross Centennial Care members. Recently, we added a digital lookup tool that gives you a different way to view prior authorization requirements for these members.



#### **Not Yet Contracted?**

Providers who are participating in commercial BCBSNM products are not automatically participating providers in Blue Cross Community Centennial₅. If you are interested in becoming a Blue Cross Community Centennial provider, please call 505-837-8800 or 800-567-8540.

#### Reminder: Update your Enrollment Information

Due to Centennial Care requirements, all enrollment information (changes to demographics, licensure or certification, provider status, etc.) must be updated on the NM Medicaid Provider Web Portal ☑

#### **BCBSNM** Website

It's important for you to stay informed about news that could affect your practice. BCBSNM offers many ways to stay informed via our website, <a href="https://bcbsnm.com/provider">bcbsnm.com/provider</a>, and our provider newsletter, <a href="https://blue.com/provider">Blue Review</a>. <a href="https://signing.up">Signing.up</a> is easy.

# Medical Policy Updates

Approved new or revised medical policies and their effective dates are usually posted on our website the 1st and 15th of each month. These policies may impact your reimbursement and your patients' benefits. These <u>policies</u> are located under the <u>Standards & Requirements</u> tab at <u>bcbsnm.com/provider</u>.

# Clinical Payment and Coding Policies

BCBSNM has adopted additional clinical payment and coding policies. These policies are based on criteria developed by specialized professional societies, national guidelines (e.g. Milliman Care Guidelines (MCG) and the CMS Provider Reimbursement Manual and are not intended to provide

billing or coding advice but to serve as a reference for facilities and providers. These policies are located under the <u>Standards & Requirements</u> tab at <u>bcbsnm.com/provider</u>.

## Claims Inquiries

Our Provider Service Unit (PSU) handles all provider inquiries about claims status, eligibility, benefits and claims processing for BCBSNM members. For the BCBSNM BlueCard® PSU, call 800-222-7992. For out-of-area claims inquiries, call 888-349-3706.

**Network Services Contacts and Related Service Areas** 

## Verify Your Directory Details & Look for Reminders

Your directory information must be verified every 90 days under a new federal law. It's easy and quick to get it done for all health plans in Availity

Demographic Change Form



# Member Rights and Responsibilities

<u>BCBSNM policies</u> help address the issues of members participating in decision making regarding their treatment; confidentiality of information; treatment of members with dignity, courtesy and a respect for privacy; and members' responsibilities in the practitioner-patient relationship and the health care delivery process.

# bcbsnm.com/provider



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