

Blue Cross and Blue Shield of New Mexico and Lovelace Health Plan Transactions Frequently Asked Questions

Please note: Do not use the Lovelace provider portal – the information on that site is now invalid.

Effective June 1, 2014, Health Care Service Corporation, a Mutual Legal Reserve Company (HCSC), acquired the Lovelace Health Plan (LHP) commercial members and the Lovelace Health Plan Medicare Advantage contract in New Mexico. HCSC operates in New Mexico as Blue Cross and Blue Shield of New Mexico (BCBSNM) and is an independent licensee of the Blue Cross and Blue Shield Association.

BCBSNM and Lovelace Health Systems share a commitment to providing access to quality, affordable health care that will allow members to experience a seamless transition. The vast majority of LHP's providers, hospitals and services are already part of the BCBSNM network. Lovelace Health System has also entered into a long-term agreement with BCBSNM to further ensure continuity in members' care.

Q1 What changes have been made to the Lovelace Medicare Plan?

A1: Effective June 1, 2014, the Medicare Advantage (MA) plan will be known as Lovelace Medicare Plan (HMO and HMO-POS) provided by BCBSNM. BCBSNM will administer the same benefits for members effective June 1, 2014. These members will now receive their Medicare Part A, B and D coverage benefits through BCBSNM's Lovelace Medicare Plan (HMO and HMO-POS).

Q2: Will BCBSNM issue new ID cards for these transitioning members?

A2: Yes. Members will receive a new ID card, which will identify the type of benefit plan features, including copays and phone numbers to call for provider customer service, the number for preauthorization for certain services and other pertinent information.

- Lovelace Health Plan members can continue to use their Lovelace member ID card until they receive new membership ID cards from BCBSNM.
- All Lovelace hospitals, clinics and pharmacies will continue to accept Lovelace member ID cards until members receive their new ID cards from BCBSNM.

Q3: Who should I contact if I have a question on a claim?

A3: If you have questions on commercial claims for dates of service **through May 31, 2014**, contact Lovelace Health Plan Customer Care at 505-727-5381 or 800-808-7363, TTY at 800-659-8331, Monday through Friday, 8 a.m. to 5 p.m.

Commercial claim questions for dates of service **on or after June 1, 2014**, the BCBSNM Provider Service Unit at 888-349-3706.

FEP plan questions for dates of service **prior to and after June 1, 2014**, contact the BCBSNM Provider Service Unit at 888-349-3706.

For all Medicare Advantage claim questions, excluding claims previously filed with Lovelace, for dates of service **prior to and after June 1, 2014**, contact BCBSNM Customer Service at 877-895-6448.

Q4: If one of my patients has a question on coverage or a claim, who should they call?

A4: If Commercial patients have questions for dates of service **through May 31, 2014**, members may continue to contact Lovelace Health Plan Customer Care at 505-727-5381 or 800-808-7363, TTY at 800-659-8331, Monday through Friday, 8 a.m. to 5 p.m.

Commercial plan members should contact BCBSNM Customer Service at 800-432-0750 for dates of service **on or after June 1, 2014**.

FEP plan members should contact BCBSNM Customer Service at 800-432-0750 for dates of service **prior to and after June 1, 2014**.

Medicare Advantage members should contact BCBSNM Customer Service at 877-895-6448 for dates of service **prior to and after June 1, 2014**.

BCBSNM Customer Service is available 6 a.m. to 8 p.m. Monday through Friday and 8 a.m. to 5 p.m. Saturdays and holidays.

Q5: How will current Lovelace Health Plan claims be processed?

A5: Commercial claims for dates of service **prior to June 1, 2014** under a Lovelace policy, submitted to Lovelace, will be processed by Lovelace Health Plan.

Medicare Advantage claims for dates of service **June 1, 2014 and beyond**, which were not previously submitted to Lovelace, will be processed by BCBSNM. All Medicare Advantage claims for dates of service **prior to June 1, 2014** and not submitted to Lovelace prior to June 1, 2014, should be submitted to BCBSNM. Please do not refile claims to BCBSNM that have already been filed with Lovelace. Medicare Advantage members will retain their current benefits under Lovelace Medicare Plan.

FEP claims for dates of service **June 1, 2014 and beyond** will be processed by BCBSNM. All FEP claims for dates of service **prior to June 1, 2014** and not already submitted to Lovelace, send to BCBSNM.

Lovelace commercial claims with dates of service **prior to June 1, 2014** should continue to be submitted to Lovelace. Lovelace commercial claims with dates of services **on or after June 1, 2014** should be submitted to BCBSNM.

Q6: What if a member has upcoming surgery scheduled? Should they cancel it?

A6: If a member has a surgery or another service scheduled while under Lovelace Health Plan coverage, this transaction does not change how those services are provided. Claims for covered services provided during this period will also be covered as indicated in the group's existing service agreement.

If a member transitions to a different health plan prior to the date of a scheduled surgery, the member and his physician will need to discuss any preauthorization review needed with the new health plan. The member can also call the customer service number on the back of their ID card to request additional information regarding any preauthorization issues.

Q7: Will the outpatient preauthorizations previously approved by Lovelace be honored?

A7: Yes, we have received an outpatient authorization file from Lovelace. As of June 1, 2014, BCBSNM has consolidated the list of preauthorization requirements for BCBSNM Medicare Advantage and Lovelace Medicare Plan. BCBSNM is honoring all preauthorizations for 90 days as transition of care. Please confirm that the appropriate authorizations are in place for services after June 1, 2014 based on the consolidated list.

Please follow these links to the Provider Reference Manual to review the Prior Authorization requirements for both the commercial and Medicare Advantage plans:

- o [Commercial Preauthorization Requirements](#)
- o [Medicare Preauthorization Requirements \(see Section 7\)](#)

Q8: Do services require preauthorization?

A8 Certain services require preauthorization. Refer to the telephone number on the back of the member's ID card or on the BCBSNM website for all lines of business.

- o [Commercial Preauthorization Requirements](#)
- o [Medicare Preauthorization Requirements \(see Section 7\)](#)

Q9: Who do I contact to request an authorization?

A9:	<u>Medical Management</u>	<u>Medicare</u>	<u>Commercial</u>
	Prior Authorizations	877-895-6448	800-325-8334
	Case Management	877-895-6448	800-325-8334
	Disease Management	877-895-6448	866-412-8795

Q10: Will Lovelace Health Plan members' current physicians and health care providers still be considered in-network once they become part of BCBSNM?

A10: BCBSNM is working to minimize any network changes and hopes to be able to provide access to the same physicians and providers. BCBSNM has a broad and extensive network, but for those LHP providers who are not part of the BCBSNM network, we will discuss the opportunity to join our network. Since December 2013, the Network department has been contacting the current providers in the LHP Medicare network to secure a contract for the Lovelace Medicare Plan membership.

Q11: How do I verify eligibility and benefits for Lovelace Medicare Plan members?

A11: For commercial and FEP plan members, call the BCBSNM Provider Service Unit at 888-349-3706 for transitioning LHP commercial members.

For Medicare Advantage members, call BCBSNM Customer Service at 877-895-6448.

Q12: Will I need to sign a new BCBSNM participating provider agreement to replace my Lovelace Medicare Plan contract?

A12: Yes, if you are not currently contracted with BCBSNM as an MAPD provider.

Q13: Will the reimbursement change after June 1, 2014?

A13: Your reimbursement is outlined in your current contract with BCBSNM.

If you do not currently have an MAPD contract with BCBSNM, your reimbursement will be based on your contract with Lovelace for a limited time, or until a contract is secured with BCBSNM.

In the event that you do not contract with BCBSNM, we will work to transition your Lovelace patients to BCBSNM-contracted providers.

Q14: Where do I submit my Medicare Advantage and FEP claims for dates of service before and after June 1, 2014?

A14: Submit **Medicare Advantage claims**, excluding those previously submitted to Lovelace, to: Lovelace Medicare Advantage Plan, PO Box 11968 Albuquerque, NM 87192

Submit all **FEP** claims to:
BCBSNM PO Box 27630 Albuquerque, NM 87125

Q15: Where do I submit my Commercial claims for dates of service before and after June 1, 2014?

A15: For dates of service **before June 1, 2014**, submit all **Lovelace commercial** claims to:
Lovelace Health Plan, PO Box 549, Buckeystown, MD 21717*

**Note: Lovelace will be accepting commercial claims with DOS before May 31, 2014, through a run-out period of 120 days which ends on September 30, 2014.*

For dates of service **beginning June 1, 2014**, submit all **Commercial** claims to:
BCBSNM PO Box 27630 Albuquerque, NM 87125

Q16: If I am already participating in the Lovelace Medicare Plan is any additional credentialing required?

A16: Additional credentialing may be required by BCBSNM if you currently do not have a contract with BCBSNM. The following criteria must be met to be eligible for participation in the Lovelace Medicare Plan provided by BCBSNM. If additional information is needed, a BCBSNM Representative will contact you.

- Must have privileges at one of the Lovelace Medicare Plan participating hospitals (unless inpatient admissions are uncommon or not required for the physician's/professional provider's specialty) or a BCBSNM Medicare Advantage participating hospital.
- Must have a valid National Provider Identifier (NPI) Number
- Cannot have opted-out of Medicare or have any sanctions or reprimands by any licensing authority or review organizations. BCBSNM Medicare Advantage Participating Physicians/Professional Providers cannot be excluded from federal health care program participation or named on the Office of the Inspector General (OIG) or Government Services Administration (GSA) lists which identify physicians/professional providers excluded from federal health care program participation.

Q17: Where can I call for additional information about the Lovelace Medicare Plan program?

A17: Please contact the BCBSNM Network Management department at:

Phone: 505-837-8800 or 1-800-567-8540

Fax: 505-816-2688 or 1-866-290-7718