BLUE CHOICE PPO^{SM} AND
BLUE HIGH PERFORMANCE NETWORK^{SM} (BLUEHPN^{SM})
PROVIDER ORIENTATION

WELCOME!

Blue Cross and Blue Shield of Texas (BCBSTX) wants to thank you for becoming a participating provider in our network(s).

Please take this opportunity to get familiar with the following information that will assist you in servicing your patients, our members:

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What should you know about Blue Choice PPO and BlueHPN?

Network Highlights

Blue Choice PPO are managed care programs where members:
- **Must use network providers to receive the highest (network) level of benefits.**
- **Do not need to select a primary care provider (PCP) and referrals are not required.**
- **Some services may require prior authorization based on the member's benefit plan**
- **Can receive out-of-network services at a reduced benefit level.**

BCBSTX also has the following plans that utilize the Blue Choice PPO network:
- **Blue Edge** - Consumer driven health plans which may utilize Health Savings Accounts (HSA) or Health Care Accounts (HCA)
- **Blue High Performance Network (BlueHPN)** - a national high-performance network available in certain counties in and near Austin, Dallas-Fort Worth, Houston and San Antonio.
- **EPO** - Exclusive Provider Organization
- **Federal Employee Program (FEP®)** - Available to Federal Employees - Refer to **FEP website** for additional details.
- **Teacher Retirement System of Texas (TRS)** - Refer to **TRS Tools** page for additional information.

Health care providers are strongly encouraged to check eligibility and benefits before rendering care to their patients/our members in these plans to make sure their services are eligible and covered.

Electronic Options

Go paperless and get new information as well as submit information electronically! Here's how:

1. Be sure that we have your current email address on file. You can submit email addresses and other demographic changes using our **Demographic Change Form**. A **User Guide** is available for assistance in completing the form. By providing your email address you will get our *Blue Review* newsletter monthly in your email. The *Blue Review* provides timely and relevant messaging related to:
   - **New products, programs and services available**
   - **Notification of changes as required by contract or other mandates**
   - **Member initiatives and patient resources**
   - **Reminders to make office practices easier using the** Did You Know **section of the** *Blue Review*

2. **Availity® Provider Portal** - Providers can conduct transactions at no charge **including eligibility and benefits, authorizations and referrals, claim processing and management. Register on Availity to get access to this time-saving, free tool.**
   - Eligibility & Benefits - We strongly encourage providers to check patient eligibility and benefits before every scheduled service. Eligibility and benefit quotes include checking membership, coverage status, prior authorization requirements and determination that the provider is in-network for the patient's policy. It also includes other important information, such as an applicable copayment, coinsurance and deductible amounts. Use Availity to submit these 270 transactions.
   - Authorizations & Referrals - **Availity's Authorizations & Referrals** tool (HIPAA-standard 278 transaction) allows the electronic submission of inpatient admissions, select outpatient services and referral requests handled by BCBSTX. Also, check the status of previously submitted requests and/or update applicable existing requests.
   - **Electronic Commerce** via EDI, ERA & EFT – Submit claims electronically online via **Electronic Data Interchange (EDI)**. Use **Electronic Funds Transfer (EFT)** to get your funds quickly by electronically transferring to your bank accounts. **Electronic Remittance Advice (ERA)** enables your office to receive claim payment and remittance details online and post them to your patient accounting system.

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Provider Tools

Provider Tools - We provide online tools to identify members and put all of your claim information at your fingertips including claim status, submitting adjustments and refunds and reviewing processing remittances. Many of these tools are available via a single sign-on through Availity.

- **Availity Attachment Tool** – Providers can quickly submit predetermination of benefit requests, medical records, itemized billing statements and other forms to assist with more efficient and timely responses.
- **Availity Claim Status Tool** - Provides the equivalent of an Explanation of Benefits (EOB), including line item breakdowns and detailed denial descriptions.
- **Claim Inquiry Resolution** (CIR) & **Electronic Refund Management** (eRM) - eRM is a method of simplifying overpayment processing. CIR, which is a tab in our eRM system, provides a method for online assistance with specific inquiries on finalized claims and related processes.
- **Clear Claim Connection** - Clear Claim Connection (C3) is a free online reference tool, that mirrors the logic behind our code-auditing software ClaimsXten™. Use C3 to help determine how coding combinations on a claim may be evaluated during the adjudication process.
- **Patient Care Summary** - Uses claim-based information to provide you with a view of a patient's health care history at the point of care. This electronic health record can help you identify gaps in care, missed prescription refills and possible drug interactions, and other "clinical flags" and treatment opportunities.
- **Patient Cost Estimator** - Online member liability estimator that can help professional and institutional providers estimate a patient's potential out-of-pocket costs in real-time for office, inpatient and outpatient services.
- **Patient ID Finder** – This tool allows providers to obtain the BCBSTX patient ID number and group number by entering patient-specific data elements.

Provider Website

The BCBSTX Provider Website is an important tool to get up to date information on being a provider with BCBSTX. Use the following navigation menus to access the most current information available:

HOME – Find important links to navigate the site. Get quick links to News and Updates; Government Programs, Provider Finder®, Policies, Employees Retirement System of Texas (ERS), Teacher Retirement System of Texas (TRS) and National Drug Codes (NDC) billing tools for contracted providers.

Network Participation – Learn about our various products, how to join additional networks, credentialing and recredentialing and how to update your information.

Claims & Eligibility – Get information on servicing members from checking eligibility and benefits, determining prior authorization requirements to our electronic options, claim tips, claim adjustments and BlueCard®.

Education & Reference – Learn how to use our tools, find forms, view ID card samples, get new updates in our News and Updates and Blue Review newsletter.

Clinical Resources – Learn about AIM Specialty Health®, understand our behavioral health program as well as taking advantage of preventive guidelines and quality improvement initiatives including HEDIS® Tip Sheets.

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Provider Website (cont.)

Pharmacy Program – Locate information about our primary Pharmacy Benefit Manager, Prime Therapeutics L.L.C. and details about our covered drug lists, dispensing limits, specialty drug programs and the Step Therapy Program.

Standards & Requirements – Find Disclosure Notices and Clinical Payment and Coding Policies and Medical Policies. Under General Reimbursement Information section, you can locate the provider manuals, request fee schedules and find detailed fee schedule information.

Note**: For more detailed information in the General Reimbursement section, you will need to enter our secure area via a password. You can obtain the password from your local** Network Management Office Location **located on the Contact Us page.**

Reference Guides and Quick Links — Bookmark this page for quick links to important information throughout our provider website and our handy Blue Choice PPO and BlueHPN Quick Reference Guide under the **Quick Reference Guides** link that provides general claim, eligibility/benefits, prior authorizations and behavioral health information.

Provider Manual

Our Blue Choice PPO and BlueHPN Provider Manual is a detailed source of information regarding these networks. You can locate the manual under the Standards and Requirements **tab, select Manuals, then select the** Blue Choice PPO and BlueHPN Provider Manual. **Below is a summary of the information provided in each section:**

- Support Services **(Section A) - Contact information when you have questions.**

- Physician and other Professional Provider Roles and Responsibilities **(Section B) including:**
    - **Various PPO plans**
    - **Referral requirements**
    - **Patient share**
    - **How to identify members**
    - **Laboratory services**
    - **Radiology services - Be sure to check benefits to determine if the services you are providing require:**
        - ➢ **Prior authorization through AIM Specialty Health® for advanced imaging services for Blue Choice PPO and BlueHPN members**
        - ➢ **A Radiology Quality Initiative (RQI) prenotification may be needed on certain outpatient procedures for Blue Choice PPO members**

- Utilization Management **(Prior Authorization and & Predeterminations)** – Sections C, D and E. Review to determine what services may require prior authorization and how to submit requests. Information is also available related to appealing decisions.

- Filing Claims **(Section F) - Learn about how to submit claims, timely filing guidelines, check claim status. how to handle refunds, recoupments and adjustments including proper forms to submit.**

- Pharmacy Services **(Section G) - Learn about the specifics of our Pharmacy benefit manager, Prime Therapeutics as well as details on other Pharmacy programs.**

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Provider Manual (cont.)

- Federal Employee Program (FEP) (Section H) - Our FEP program has a special section to describe items that are specific to this plan.

- Behavioral Health Services (Section I) - This section details the behavioral health components as well as how to submit prior authorization requests, claim filing information as well as contacts.

- Quality Improvements (Section J) - Learn about best practices and how to improve care to our members and what is required in your medical records to meet BCBSTX and HEDIS® requirements.

- Disease Management Programs (Section K) - Get details on disease and condition management services as well as other programs like Special Beginnings® (for OB care), Preventive and Clinical Practice Guidelines.

- Privacy of Information (Section L) - Review the BCBSTX Privacy Polices and Procedures including information on minimum necessary protected information and business associate requirements.

- Blue Distinction (Section M) - Determine when a member has Blue Distinction benefits and how to identify providers who are recognized for their expertise and quality of care and have been given the Blue Distinction designation.

- Hospital Acquired Conditions/Serious Reportable Events (Section N) - See how BCBSTX applies the principles and guidelines of these events to determine provider reimbursements.

- Rights and Responsibilities (Section O) - Includes details on member and provider's responsibilities while treating members.

Behavioral Health Services

Refer to the Behavioral Health Program page on the provider website for guidelines. Certain services may require prior authorization and can be submitted using Availity Authorizations & Referrals or by calling the number on the back of the member's ID card.

Clinical Payment and Coding Policies

Clinical Payment and Coding Policies (CPCP) serve as a reference to assist providers on reimbursement and coverage information. Be sure to review the various CPCP's when providing services to our members. Also, watch for periodic updates to the CPCP page.

Medical Policies and Predetermination of Benefits

Medical Policies are used to make benefit coverage determinations and are based on data from the peer-reviewed scientific literature, from criteria developed by specialty societies and from guidelines adopted by other health care organizations. Providers can submit a Predetermination of Benefits (voluntary utilization management reviews) when you are not sure about coverage or whether we may or may not consider the service/procedure medically necessary.

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Provider Finder®

Provider Finder is a directory of providers participating in the Blue Choice PPO or BlueHPN network. If you need assistance, review the **Provider Finder User Guide** .

- Providers use it to locate in-network specialists, ancillary or facility providers to refer members for further treatment or services.
- Members use it to find you so providers should verify their own demographic information to make sure it is correct. If you identify updates that need to be made, complete the **Demographic Change Form** on the **How to Update your Information** page. Refer to the **Demographic Change Form User Guide** , if you need assistance.

Utilization Management

Utilization Management (UM) includes details on prior authorizations, predeterminations and post-service reviews of services for medical necessity.

- Check for authorization requirements online through Availity or your preferred vendor. Authorizations may be required via BCBSTX UM or AIM Specialty Health®.
- Refer to the **Utilization Management** page for additional information including:
  - Lists of services that may require prior authorization
  - How to submit requests online and by phone
  - Who to contact for prior authorization

Keep Up to Date

Disclosure Notices - **Notifications posted to the provider website as required by state or federal regulations or contractual requirements. Providers should periodically check the website for Disclosure Notices.**

Blue Review Newsletter - **We post monthly to the website and email the *Blue Review* newsletter. Make sure we have your current email on file to receive this newsletter electronically in your email box.**

News and Updates - **We want to keep you informed on new changes to BCBSTX as well as provide helpful information while treating patients/members. Be sure to check News and Updates periodically.**

Want to learn more? **We have free webinars every month on Availity tools such as submitting claims, reviewing remittance advices and checking claim status. We also offer periodic training for AIM and CME/CEU sessions. Check out the Educational Webinar Sessions page for upcoming sessions.**

Contacts

If you are unable to find the information you need on the provider website or need assistance with eligibility and benefits or claims and are unable to resolve using the electronic options: Contact Provider Customer Service **at** 1-800-451-0287.

Utilize Contact Us on the provider website for contact and mailing information for claims, customer service, utilization management and various external vendors including AIM Specialty Health and Availity. And most importantly, if you have questions regarding this orientation, our networks or your contract, you can locate your local Network Management Office Location on Contact Us.

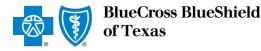# BLUE CHOICE PPO AND BLUEHPN
PROVIDER ORIENTATION WEBLINKS

TOPIC	WEBLINK:
Availity	www.availity.com
Availity Authorizations & Referrals	https://www.bcbstx.com/provider/tools/availity-authorizations.html
Availity Attachment Tool	https://www.bcbstx.com/provider/tools/availity-attachments.html
Availity Claim Status Tool	https://www.bcbstx.com/provider/claims/availity_claim_status.html
Behavioral Health Program	https://www.bcbstx.com/provider/clinical/behavioral_health.html
Blue Choice PPO and BlueHPN Provider Manual	https://www.bcbstx.com/provider/gri/bluechoice_manual.html
Blue Review Newsletter	https://www.bcbstx.com/provider/news/bluereview.html
Claim Inquiry Resolution	https://www.bcbstx.com/provider/claims/cir_tool.html
Demographic Change Form	https://hcscproviderintake.secure.force.com/TXDemographUpdate
Claims & Eligibility	https://www.bcbstx.com/provider/claims/index.html
Clear Claim Connection	https://www.bcbstx.com/provider/tools/clear_claim_connection.html
Clinical Payment & Coding Policies	https://www.bcbstx.com/provider/standards/cpcp.html
Clinical Resources	https://www.bcbstx.com/provider/clinical/index.html
Contact Us	https://www.bcbstx.com/provider/contact_us.html
Disclosures	https://www.bcbstx.com/provider/standards/disclosures.html
Education & Reference	https://www.bcbstx.com/provider/education_reference.html
Educational Webinar Sessions	https://www.bcbstx.com/provider/training/provider_education.html
Electronic Commerce	https://www.bcbstx.com/provider/claims/edi_commerce.html
Electronic Data Interchange (EDI)	https://www.bcbstx.com/provider/claims/edi_transactions.html

BLUE CHOICE PPO AND BLUE HIGH PERFORMANCE NETWORK (BLUEHPN)
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TOPIC	WEBLINK:
Electronic Funds Transfer (EFT) & Electronic Remittance Advice (ERA)	https://www.bcbstx.com/provider/claims/era.html
Electronic Refund Management	https://www.bcbstx.com/provider/tools/erm.html
Federal Employee Program	https://www.fepblue.org/
ID Card Samples	https://www.bcbstx.com/provider/training/id_card_samples.html
Medical Policies	http://www.medicalpolicy.hcsc.net/medicalpolicy/disclaimer?corpEntCd=TX1
Network Participation	https://www.bcbstx.com/provider/network/index.html
News & Updates	https://www.bcbstx.com/provider/news/index.html
Patient Care Summary	https://www.bcbstx.com/provider/claims/careprofile.html
Patient Cost Estimator	https://www.bcbstx.com/provider/claims/carecost_estimator.html
Patient ID Finder	https://www.bcbstx.com/provider/tools/patient_id_finder.html
Pharmacy Program	https://www.bcbstx.com/provider/pharmacy/index.html
Provider Finder	https://www.bcbstx.com/find-a-doctor-or-hospital
Provider Finder User Guide	https://www.bcbstx.com/provider/pdf/provider-finder-user-guide.pdf
Provider Tools	https://www.bcbstx.com/provider/tools/index.html
Provider Website	https://www.bcbstx.com/provider
Predetermination of Benefits	https://www.bcbstx.com/provider/clinical/predetermination_requests.html
Quick Reference Guides	https://www.bcbstx.com/provider/training/product_group_ref.html

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TOPIC	WEBLINK:
Reference Guides and Quick Links	**https://www.bcbstx.com/provider/training/reference_guide.html**
Standards & Requirements	**https://www.bcbstx.com/provider/standards/index.html**
TRS Tools	**https://www.bcbstx.com/provider/trs-tools.html**
Utilization Management	**https://www.bcbstx.com/provider/claims/um.html**