

For physician offices

## BCN changes process for requesting a member transfer

Blue Care Network has changed the process a primary care physician should use when requesting that a member be removed from his or her practice and assigned to another primary care physician.

The primary care physician the member is currently assigned to must complete the Member Transfer Request Form and submit it to BCN. The form is on the last page of a frequently asked questions document. The document can be found on [bcbsm.com/providers](http://bcbsm.com/providers). Click Login and log in to Provider Secured Services. Click *BCN Provider Publications and Resources*, then *Forms*. Click *Member Transfer FAQ and Request Form*, under the "Member transfer" heading.

## February is American Heart Month

As a reminder, it's important for members to be appropriately screened for conditions that can affect heart health. Read how you can remind patients of risk factors and what they can do to improve their heart health on [Page 15 of the January–February 2019 BCN Provider News](#).

## Sign up to receive *Blues Brief* electronically

As announced on [Page 7 of the January–February 2019 BCN Provider News](#) and the [January 2019 issue of \*The Record\*](#), *Blues Brief* has a new look and is now available via email subscription. To sign up and avoid possible subscription errors, add *Blues Brief* to your subscriptions by clicking the Manage Subscriptions link at the bottom of your *BCN Provider News* or *The Record* newsletter emails. You can also visit the subscription page on [bcbsm.com/providers](http://bcbsm.com/providers) to choose your preferred *Blues Brief* versions.

## 2019 Quality Rewards program announced

Blue Cross and BCN have posted the 2019 Quality Rewards program booklet on Health e-Blue<sup>SM</sup>. The Quality Rewards program is Blue Cross and BCN's Performance Recognition Program and Physician Group Incentive Programs combined. Please note the latest version should say "Revised January 2019" on pages two through 12.

## HEDIS medical record reviews begin in February

Blue Cross HEDIS clinical consultants will be conducting Healthcare Effectiveness Data and Information Set, or HEDIS<sup>®</sup>,\* medical record reviews from February through May. HEDIS reviews will be conducted for Blue Cross commercial PPO and Medicare Plus Blue<sup>SM</sup> PPO members for the 2018 measurement year.

Blue Cross HEDIS clinical consultants will contact you to schedule an appointment for a HEDIS review or request that you fax the necessary records. The HEDIS review also requires proof of service documentation for data collected from a medical record.

These reviews are in addition to the out-of-state medical record reviews that Inovalon conducts for the Blue Cross and Blue Shield Association. For more information, see [Page 23 of the January–February 2019 BCN Provider News](#) or the [February 2019 issue of \*The Record\*](#).

\*HEDIS is a registered trademark of the National Committee for Quality Assurance.

Articles apply to all lines of business unless noted by the icons below:

Key:  BCN HMO<sup>SM</sup>  Blue Cross PPO  BCN Advantage<sup>SM</sup> HMO  Medicare Plus Blue<sup>SM</sup> PPO

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## RA Limited Choice program gets new name — CA Limited Choice

Blue Cross and BCN are renaming their Religious Accommodation Limited Choice program. It will now be called the Contraceptive Accommodation Limited Choice, or CA Limited Choice, program.

Members who enroll in the program on or after Jan. 14, 2019, will receive new ID cards. Members who are already enrolled may continue to use their RA Limited Choice ID cards.

Blue Cross and BCN members must use either their CA Limited Choice ID card or their RA Limited Choice ID card to obtain contraceptive services at no cost share from a network provider.

For more information, see the [February 2019 issue of \*The Record\*](#).

## Virtual program focuses on improving member well-being, resilience

Blue Cross has launched the innovative Blue Cross® Virtual Well-Being program to help your patients learn how to improve their overall well-being and increase resilience.

This program features live weekly webinars and downloadable content for members, with topics that include emotional health, financial wellness, physical health and more. Well-Being is available for all Blue Cross and BCN members.

Members can register for Virtual Well-Being webinars at [bluecrossvirtualwellbeing.com](http://bluecrossvirtualwellbeing.com).

For more information, see the [February 2019 issue of \*The Record\*](#).

## Clarification: Billing on behalf PPO of a behavioral health provider

In the [March 2018 issue of \*The Record\*](#), we explained that modifiers AJ and HO are required on claims where the services are billed by a supervising behavioral health provider but rendered by one of the following provider types:

- Limited licensed professional counselor
- Limited licensed master social worker
- Temporary limited licensed psychologist
- Limited licensed marriage and family therapist

**We want to let you know that these modifiers must be used when billing on behalf of any behavioral health provider, not just the ones listed above.**

For more information, see the [February 2019 issue of \*The Record\*](#).

## Clarification: Prior authorization PPO scope change for PPO members

In a [December 2018 issue of \*The Record\*](#), Blue Cross shared information about a program change, directing providers to obtain prior authorization for high-tech radiology, in-lab sleep management and echocardiogram services for PPO non-Medicare patients who live in Michigan.

We wanted to add clarifying information regarding UAW Retiree Medical Benefits Trust (URMBT) non-Medicare members. For these members, authorizations will be required for high-tech radiology, medical oncology and radiation oncology services whether they live in or out of state. For more information, see the [February 2019 issue of \*The Record\*](#).

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