

For physician offices

Take our *Blues Brief* survey!

We want to know how satisfied you are with the *Blues Brief* newsletter. Please click [here](#) to take our survey. The survey closes March 31.

Changes effective Jan. 1, 2020

See the *December issue of Blues Brief for physician offices* for a list of changes in effect Jan. 1.

BCN offers 19 individual products for 2020

Blue Care Network is offering 19 products for the 2020 marketplace:

- 3 products in 15 Upper Peninsula counties
- 6 products in 48 rural lower peninsula counties
- 19 products in three Southeast Michigan counties
- 13 products in 17 urban counties

As always, check member eligibility and benefits at every visit before providing services. You can do this through web-DENIS or by calling Provider Inquiry at 1-800-344-8525. Read more on [Page 1 of the November–December 2019 BCN Provider News](#).

We've discontinued our fax line for the Behavioral Health Incentive Program

We suspended the BHIP self-reported Therapeutic Alliance and Primary Care Physician Contact measures in July 2018. Since these submissions are no longer accepted, we've discontinued the BHIP fax line. See this information on [Page 20 of the January–February 2020 BCN Provider News](#).

Holiday office closings

Blue Cross and BCN offices will be closed Jan. 20 (Martin Luther King, Jr. Day).

e-referral upgrades coming in February

Two new enhancements are coming to the e-referral system to simplify the user experience. The expected go-live date is mid-February 2020.

The enhancements include:

- Individual users will be able to flag referrals and authorizations that they are watching.
- A new feature will display unread communications with a blue dot envelope icon.

Upcoming *Learning to use the New Features of e-referral* webinars will be available starting in January.

Read more on [Page 44 of the January–February 2020 BCN Provider News](#) and the *January 2020 issue of The Record*.

Opioid epidemic updates

Blue Cross to launch new medication-assisted treatment program

See the January 2020 issue of *The Record*.

No referral required for approved BCN providers offering medication-assisted treatment for opioid use disorders

See [Page 1 of the January–February 2020 BCN Provider News](#).

Blue Cross, BCN to support providers who offer comprehensive opioid treatment

See [Page 24 of the January–February 2020 BCN Provider News](#) or the *December 2019 issue of The Record*.

Free waiver training opportunities offered

See [Page 19 of the January–February 2020 BCN Provider News](#) or the *January 2020 issue of The Record*.

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

Key:  BCN HMOSM  Blue Cross PPO  BCN AdvantageSM HMO  Medicare Plus BlueSM PPO

For physician offices

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Sign up for additional training webinars

We're continuing our series of training webinars for health care providers and staff. To find out more and/or to register, see [Page 6 of the January–February 2020 BCN Provider News](#) or the [January 2020 issue of The Record](#).

Submit prior authorization requests electronically for pharmacy benefit drugs HMO PPO

Providers can now use their electronic health record or CoverMyMeds®* to submit prior authorizations for Blue Cross Blue Shield of Michigan and Blue Care Network commercial members with commercial pharmacy benefits.

Electronic prior authorization, or ePA, replaces faxing and phone calls so providers can focus less on administrative tasks and more on patient care. For more details, see the [January 2020 issue of The Record](#).

*Other free ePA services include Surescripts® and ExpressPAth®.

We're changing how we cover some drugs starting Jan. 1 HMO

We're changing how we cover some brand-name and generic drugs, starting Jan. 1, 2020. We're also setting new quantity limits on certain drugs.

We continuously review prescription drugs to provide the best value for our members, control costs and make sure our members are using the right medication for the right situation. Read more about the changes to the drug lists and quantity limits on [Page 30 of the January–February 2020 BCN Provider News](#).

Healthy Blue Living physical exams and qualification forms reminders HMO

Each Healthy Blue LivingSM HMO member is required to visit his or her primary care physician for an exam within 90 days of enrollment or renewal. BCN encourages each member to see his or her PCP well before the deadline and will accept a qualification form from an office visit occurring up to 180 days before the member's renewal date. For information on how to bill for the exam or qualification form, see [Page 3 of the January–February 2020 BCN Provider News](#).

We're aligning peer-to-peer review request processes for acute non-behavioral health non-elective inpatient admissions

For acute non-behavioral health non-elective inpatient admissions, the process for requesting a peer-to-peer review with a Blue Cross or BCN medical director is now the same for all lines of business. This applies to inpatient admission authorization requests denied for Blue Cross' PPO, Medicare Plus BlueSM PPO, BCN HMOSM and BCN AdvantageSM members. For more information, see [Page 40 of the January–February 2020 BCN Provider News](#) or the [January 2020 issue of The Record](#).

Balance billing allowed for nonstandard hearing aids PPO

Effective Jan. 1, 2020, new hearing procedure codes were added to the nonstandard hearing aids list. The approved amount for standard hearing aids is payment in full, meaning you can't bill the member for any amounts in excess of applicable copayments and deductibles. If a member chooses a nonstandard hearing aid, you may bill for the difference between our approved amount for a standard hearing aid and the actual cost of the nonstandard hearing aid. For more details, see the [January 2020 issue of The Record](#).

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Key: HMO BCN HMOSM PPO Blue Cross PPO MA HMO BCN AdvantageSM HMO MA PPO Medicare Plus BlueSM PPO