# Blues Brief



For physical, occupational and speech therapy offices

## Finding the latest coronavirus (COVID-19) provider information

Our provider communications about the COVID-19 pandemic can be found on the Coronavirus (COVID-19) information updates for providers webpage located within BCBSM Newsletters and Resources or BCN Provider Publications and Resources on web-DENIS. Our public webpage for providers is located at **bcbsm.com/coronavirus**. Click on For providers.

## **Extension of benefit period for** authorized PT, OT and ST during **COVID-19 emergency continues** through Dec. 31

The extension of the benefit period for completing authorized physical, occupational and speech therapy (and physical medicine services by chiropractors) to 180 days from 60 days continues through Dec. 31, 2020.

The benefit period starts on the date of the first treatment.

Here's how this extension will be phased in:

- For members who start therapy on or after March 26, 2020, the benefit period will extend through Dec. 31, 2020.
- As the end of the year grows closer, the benefit period will revert back to 60 days (when applicable), for members whose 60-day benefit window would normally extend beyond Dec. 31, 2020.

See more on Page 4 of the COVID-19 utilization management changes (PDF).

## eviCore has updated corePath for physical and occupational therapy authorizations



Effective immediately, eviCore healthcare® has made changes to the corePath<sup>SM</sup> therapy authorization model for initial authorization requests for new episodes of treatment. This change applies to:

- Physical therapy providers in categories B and C
- Occupational therapists in category B

For providers in categories B and C: When initial authorization requests meet certain conditions, eviCore is approving a greater number of visits over a longer authorization duration period. The logic in eviCore's corePath model determines the number of visits and authorization duration based on the patient's condition and complexity of the condition.

For more information, see Page 30 of the September-October 2020 BCN Provider News or the August 2020 issue of The Record.

# Physical, occupational and speech therapy outpatient professional claims to require appropriate modifier

Physical, occupational and speech therapy providers are now required to append the appropriate modifier to procedure codes for all outpatient professional claims for physical, occupational and speech therapy services. Therapy providers are encouraged to begin billing with the modifiers as soon as possible. For more details, see the March 2020 issue of The Record.

#### Holiday office closings

Blue Cross and BCN offices will be closed on Sept. 7 for Labor Day.

Continued on the next page

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











# **Blues Brief**



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## Changes to Michigan's auto nofault insurance law may increase need for coordination of benefits

Effective with auto insurance policies issued or renewed after July 1, 2020, individuals will no longer be required to carry unlimited personal injury protection, or PIP, with their auto insurance. These changes may lead to more instances where providers need to coordinate benefits for their patients.

In addition, the Coordination of Benefits chapter of the Blue Cross PPO provider manual has been updated to include when to request a reason for denial letter.

For more information, see Page 32 of the July-August 2020 BCN Provider News or the July 2020 issue of The Record.

## Interventional pain management services for \*64451 and \*64625 require authorization

Services associated with procedure codes \*64451 and \*64625 require authorization by eviCore healthcare for dates of service on or after May 1, 2020. This requirement applies to all Blue Cross PPO, Medicare Plus Blue<sup>SM</sup> PPO, BCN HMO<sup>SM</sup> and BCN Advantage<sup>SM</sup> members with plans subject to eviCore healthcare authorization requirements.

For more information, see Page 24 of the May-June 2020 BCN Provider News or the April 2020 issue of The Record.

\*CPT codes, descriptions and two-digit numeric modifiers only are copyright 2019 American Medical Association.

## We're issuing new alphanumeric contract numbers in 2021

Blue Cross and BCN will issue alphanumeric contract

numbers to new members starting sometime in 2021. This is a change from the previously announced start date, which was July 1, 2020. Additional information will be published once the exact implementation date is identified.

For more information, see Page 7 of the July-August 2020 BCN Provider News or the June 2020 issue of The Record.

## Some Blue Care Network (HMO) (MA) transitional care fax numbers have been discontinued

The following BCN transitional care fax numbers were discontinued on June 1.

- 1-866-652-8985
- 1-866-578-5482

If you had been faxing transitional care authorization requests or clinical documentation — or any other documentation — to those numbers, you must submit those materials using a different method. For more details, see Page 36 of the July-August 2020 BCN Provider News.

#### On-demand training available

Provider Experience is continuing to offer training resources to help clinical and administrative staffs work more efficiently with Blue Cross and BCN. You can now access recordings of provider training webinars delivered so far in 2020 through web-DENIS. For more information, see the Page 9 of the July-August 2020 BCN Provider News or the August 2020 issue of The Record.

#### **Blues Brief survey results**

Earlier this year, we conducted an online survey to find out how satisfied you are with the monthly professional, quarterly facility and specialty versions of Blues Brief. Read the results on Page 8 of the September-October 2020 BCN Provider News or the August 2020 issue of The Record.

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Key: HMO BCN HMO<sup>SM</sup>





