February 2023 **Blues Brief**



For physician offices

Follow these tips for checking eligibility and benefits in Availity

To get started checking eligibility and benefits on our new provider portal, Availity[®] Essentials, simply click on Patient Registration at the top of your Availity home screen. Then select Eligibility and Benefits Inquiry. Read more:

- Page 3 of the January–February 2023 **BCN Provider News**
- December 2022 issue of The Record

Availity is an independent company that contracts with Blue Cross Blue Shield of Michigan and Blue Care Network to offer provider portal services.

Reminder: HEDIS® medical record reviews begin in February

Each year from February through May, Blue Cross Blue Shield of Michigan conducts Healthcare Effectiveness Data and Information Set, or HEDIS®, medical record reviews for members who live in Michigan. This year, Blue Cross' HEDIS clinical consultants will conduct HEDIS reviews for members who had services in 2022. Read more:

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HEDIS®, which stands for Healthcare Effectiveness Data Information Set, is a registered trademark of the National Committee for Quality Assurance, or NCQA.

For Blue Cross commercial members, follow ICD-10-CM laterality policy

In support of correct coding and payment accuracy, Blue Cross Blue Shield of Michigan commercial plans will apply the ICD-10-CM laterality policy for diagnosis-to-modifier comparison and diagnosis-to-diagnosis comparison. This change will take effect in March 2023. Read more: February 2023 issue of The Record

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

Key: HMO Blue Care Network commercial PPO Blue Cross commercial HMO BCN AdvantageSM PPO

Reminder: Submit Healthy Blue Living[™] HMO qualification forms electronically

As a reminder, primary care physicians submitting the Blue Care Network Qualification Form for Blue Care Network members with health care coverage from Healthy Blue LivingSM HMO, Healthy Blue Living HMO Basic[™] or BCN Wellness Rewards Tracking[™] must do so electronically through BCN Health e-BlueSM. BCN doesn't accept paper gualification forms. Read more: Jan. 11, 2023 provider alert

Billing for visits

BCN will pay primary care physicians \$40 (per member per year) for each qualification form submitted on Health e-Blue. You must file a claim with BCN for the examination to receive reimbursement for completing members' qualification forms. Claims for completing the form should be billed in the amount of \$40 using the CPT code *99080 and the diagnosis code is Z00.00 or Z00.01 For a detailed description of this process, review the Billing instructions: Visits and forms for Healthy Blue Living HMO, Healthy Blue Living HMO Basic and BCN Wellness Rewards Tracking for BCN HMO (commercial) PDF available on the Provider Resources site, accessible through our provider portal. Click BCN on the Products drop-down menu.

*CPT codes, descriptions and two-digit numeric modifiers only are copyright 2022 American Medical Association. All rights reserved.

Training updates

Register now for 2023 virtual provider symposium sessions

Read more: February 2023 issue of The Record

Sign up for webinar about E/M code changes Read more: February 2023 issue of The Record

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Medicare Plus BlueSM

Blue Cross Blue Shield of Michigan and Blue Care Network are nonprofit corporations and independent licensees of the Blue Cross and Blue Shield Association.

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For physician offices

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Voluntary prior authorization ends May 1

Effective May 1, 2023, Blue Cross Blue Shield of Michigan will no longer accept voluntary prior authorization requests. Due to new Michigan prior authorization legislation requirements, Blue Cross will devote its resources to evaluating only those prior authorizations that are required by the patient's benefit plan. Read more: February 2023 issue of *The Record*

2023 Quality Rewards program announced

Blue Cross and BCN have posted the 2023 Quality Rewards program booklet in the *Resources* section of Health e-BlueSM. The Quality Rewards program is Blue Cross and BCN's Performance Recognition Program and Physician Group Incentive Programs combined.

Health care providers in Blueprint for Affordability shared-risk program improve performance

Nearly three years after the launch of the Blueprint for Affordability shared-risk payment model, we're seeing some impressive results. Physicians in Blueprint arrangements improved affordability by more than \$70 million, increased overall health care quality and improved patient outcomes. Read more: February 2023 issue of *The Record*

Rx updates

We're no longer requiring prior authorization for 29 medical oncology drugs Read more: February 2023 issue of *The Record*

Requirements changed for some HMO PPO commercial medical benefit drugs Read more: February 2023 issue of *The Record*

Fylnetra and Rolvedon to require prior HOP PPO authorization for most commercial members starting March 13 Read more: February 2023 issue of The Record

Finding the latest coronavirus (COVID-19) provider information

Our provider communications about COVID-19 can be found here:

- In the Member Care section of our Provider Resources site, accessible through Availity[®]
- Our public webpage for providers is located at **bcbsm.com/coronavirus**. Click on *Health Care Providers*.

2023 CPT and HCPCS Update now available

Each year, we publish our *CPT* and *HCPCS* Update document, containing new and deleted CPT and HCPCS codes, and post it on the *Provider Resources* site of Availity[®]. Our new document contains new and deleted codes, effective Jan. 1, 2023. Read more: **February 2023 issue of** *The Record*

Medicare Plus BluesM

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