How to Complete the *Patient Diagnosis Evaluation and Treatment Opportunities Report*
Who receives the *Patient Diagnosis Evaluation and Treatment Opportunities Report*?

Providers who aren’t enrolled in Health e-Blue
Types of Diagnosis Gaps

**Historic**

- Patient had a diagnosis gap in previous years
- Diagnosis has not been submitted during the current calendar year

**Suspected**

- Patient may have a condition that hasn’t been diagnosed
- Based on supplemental data
Diagnosis Closure Incentive Program

Managed
Evaluated
Assessed
Treated

- Face-to-face office visit
- Within the program year
Ways to Close Diagnosis Gaps

Completing and signing the *Patient Diagnosis Evaluation and Treatment Opportunities Report*

Submit a **claim**

Closing the diagnosis gaps through Medicare Advantage Health e-Blue (**HEB**)
Blue Cross Blue Shield of Michigan and Blue Care Network are nonprofit corporations and independent licensees of the Blue Cross and Blue Shield Association.

**Provider and Patient Information Sections**

- **Your name and NPI**
- **Provider organization’s name and number**
- **Patient name and product**
- **Contract number**
- **Gender**
- **Date of birth**
# Diagnosis Evaluation Section

## Diagnosis gap conditions

<table>
<thead>
<tr>
<th>Gap Condition</th>
<th>Gap Type</th>
<th>Does this patient have this condition?</th>
<th>Enter Date of Service*</th>
<th>Enter ICD 10 Code and provide medical record for this date of service</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>□ Yes □ No</td>
<td>01/01/2019 - 12/31/2019</td>
<td></td>
</tr>
</tbody>
</table>

*All replies must be based on an assessment performed at a face-to-face patient visit that has occurred within the current calendar year. If you reply YES/NO to a gap condition, there must be supporting documentation in the medical record that meets the Centers for Medicare & Medicaid Services coding guidelines.

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**Does the patient have this condition? Check “yes” or “no”**

**When did you confirm the diagnoses gaps?**

**Code for the diagnosis**
### Treatment Opportunities Section

**Treatment opportunities**

**Services needed**

<table>
<thead>
<tr>
<th>Measure</th>
<th>Service Needed</th>
<th>If the service has not been rendered, schedule the patient for a face-to-face visit*</th>
<th>If service has been rendered</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Is a medical record attached?  □ Yes  □ No
## Bottom Section

**TO BE COMPLETED BY THE PHYSICIAN (REQUIRED)**

<table>
<thead>
<tr>
<th>Field</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Signature</td>
<td>Signature: _______________________________________________</td>
</tr>
<tr>
<td>Name (Print)</td>
<td>Name (Print): ____________________________________________</td>
</tr>
<tr>
<td>Tax ID# and Name</td>
<td>Tax ID# and Name: _________________________________________</td>
</tr>
<tr>
<td>Office Contact Name</td>
<td>Office Contact Name: _____________________________________</td>
</tr>
</tbody>
</table>

**INSTRUCTIONS**

You must provide all of the required information in the Data Return sections.

To validate the information presented in this form, the medical professional must:
1. Provide a signature (Stamp signatures are not allowed)
2. Check credential box
3. Indicate Tax ID and Tax ID Name registered with the IRS

To receive your incentive payment, you must submit the patient's medical record to support the information you have entered on this request. Contact Clinical Consultants, Tom Rybarczyk at 313-378-8359 or Corinne Vignali at 313-969-0417 with any questions.

**RETURN**

Please return completed forms and other supporting documentation to:

- **Fax:** 1-866-707-4723
- **Mail:** Blue Care Network
  - Mail Code G803
  - P.O. Box 68710
  - Grand Rapids, MI 49516-8710

**Office Phone Number**
Medicare ICD-10 Coding Frequently Asked Questions


2019 ICD-10-CM

2019 ICD – 10 PCS
Provider Recognition Program

Rewards providers for closing treatment opportunity gaps for Medicare Advantage patients by December 31

- Breast cancer screening
- Colorectal cancer screening
- Controlling blood pressure
- Osteoporosis management in women
- Rheumatoid arthritis management
- Follow up after hospitalization

- Diabetes care – blood sugar control
- Diabetes care – kidney disease management
- Diabetes – eye exam
- Statin therapy for patients with cardiovascular disease
- Statin use in person with diabetes
Submitting the Report

Fax the completed report and supporting medical record documentation to:

1-866-707-4723

Mail to:

Blue Care Network, Mail code G803,
P.O. Box 68710
Grand Rapids, MI 49516-8710
Instructions – Patient Diagnosis Evaluation and Treatment Opportunities Report

We provide a report for each Blue Cross Medicare Plus Blue patient who has a diagnosis gap or a treatment opportunity. Please note there are two types of diagnosis gaps:

- **Historic** – The patient has had a diagnosis in previous years, but this diagnosis has not been submitted during the current calendar year.
- **Suspected** – The patient may have a condition for which he or she hasn’t been diagnosed. This is based on supplemental data, such as pharmacy claims, lab, durable medical equipment or self-reported conditions through the patient health assessment.

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**Diagnosis Evaluation**

Confirm your patients’ diagnoses during a face-to-face office visit this calendar year and record the date.

- Enter an ICD-10 code.

  - If the patient has the condition, check the box for “Yes,” and place supporting documentation in the patient’s medical record. If the patient doesn’t have the condition, check the box for “No.”

**Patient Treatment Opportunities**

Review the services needed and submit the portion of the patient health records that support the service/test and results. Provide a copy of the medical record documenting the service/test and results.

- If the patient hasn’t had the service, contact the patient to schedule an appointment and encourage the patient to obtain the service listed.

**This information is required:**

1. Signature
2. Printed name
3. Tax ID# and name
4. Enter Office Manager contact name and phone number

Use the checkbox to indicate your credentials here.

Please fax the completed report to 1-866-707-4723. Or, mail to Blue Care Network, Mail Code G803, P.O. Box 68710, Grand Rapids, MI 49516-8710.

For complete specifications about the Diagnosis Closure Incentive program, visit Medicare Advantage Health e-Blue to download the 2019 Medicare Advantage Diagnosis Closure Incentive Program document.
For more information about the Diagnosis Closure Incentive program refer to your *Medicare Advantage Diagnosis Closure Incentive Program* booklet.

Or if you need a copy of the booklet or have questions about the Diagnosis Closure Incentive program, please contact clinical provider consultants:

- Tom Rybarczyk at 1-313-378-8259
- Corinne Vignali at 1-313-969-0417