



We're simplifying the Master Medical reimbursement process on MOS

By now, you have heard about Blue Cross Blue Shield of Michigan's ongoing conversion to a new, consolidated operating system called the Michigan Operating System or MOS. As part of that conversion, contracts for members who have Master Medical coverage will be transferred to the new system, and the way we reimburse these services will change.

There are about 70,000 members currently enrolled in the Master Medical plan, who represent approximately 1.5 percent of our total Michigan membership.

We've been receiving requests for clarification on what this means for providers, so we're providing answers to frequently asked questions below for your reference.

Q: When are the members converting to MOS?

A: The migration of Master Medical contracts to MOS will occur in phases starting this summer. Not all contracts will be transferred at the same time.

Q: Since everyone is not converting at the same time, how will I know when a patient has been transferred?

A: Check web-DENIS for benefits and eligibility. Your patients will have a rider on their coverage called MMC-MOS (Master Medical Certificate – Michigan Operating System) if their contracts have been migrated to the new system.

Q: What does this mean for me, my claims and billing for services for patients who have this rider?

A: If you are a participating provider and submit a claim for a member who has the MMC-MOS rider, BCBSM will pay you the approved amount, less the patient's copayment, coinsurance and/or deductible for medically necessary, covered services. As with our other coverage plans, you agree to accept our approved amount as payment in full for covered Master Medical services.

We determine the approved amount based on the reported charges and BCBSM's maximum payment level. In some cases, we consider the complexity of the services rendered and the intensity of the care

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provided when determining the payment level.

The claim disposition will appear on your MOS voucher. Your payment for these services will be included in your Electronic Funds Transfer (which is mandatory for providers billing on the 1500 claim).

This is different from the way Master Medical claims are handled today. It is important to note that only those members with the MMC-MOS rider will be processed this way.

Q: If I am a participating provider, do I have to submit the claims for patients who have the MMC-MOS rider?

Yes. As part of your formal agreement with BCBSM, you must submit the claim on behalf of the member and BCBSM pays you directly for the covered service.

Q: What about patients who do not have this rider?

A: If the patient does not have the MMC-MOS rider, but is enrolled in a Master Medical plan, payment will continue to be sent to the member. The claim will appear on your Local voucher with the message, "We forwarded this service to Master Medical for consideration. If we approve payment, it will be sent to the subscriber. Please follow up with the subscriber."



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Q: Are there situations where you won't send payment directly to the provider even though the patient has the MMC-MOS rider?

A: Yes. Payment may still be directed to the subscriber if a nonparticipating provider does not accept assignment or does not participate on a per-claim basis. We'll also send payment to the subscriber if he or she submits the claim and receipt to BCBSM for processing of Master Medical services received from nonparticipating providers who do not accept our assignment or do not participate on a per-claim basis. Payments are sent to only one recipient. We'll pay the subscriber the approved amount (instead of charges) less any deductible, coinsurance, and/or copayments, as we do with our other providers. Any remaining balance will be the subscriber's responsibility.

Q: So does this mean that the Master Medical benefits are changing?

A: No. The Master Medical benefits are not changing. We are only changing the way we process reimbursement.

Q: How will I know what the member's Master Medical benefits and cost share are?

A: We are working to have Master Medical benefits and associated cost-share information included on CAREN and web-DENIS.

Q: Who should I contact if I have additional questions about the new reimbursement process?

A: Please contact your provider consultant. We'll also provide updates in web-DENIS alerts and *The Record*.