



# BLUE REVIEW<sup>SM</sup>

A NEWSLETTER FOR MONTANA HEALTH CARE PROVIDERS

SECOND QUARTER 2018



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# Blue Cross and Blue Shield of Montana Announces New Chief Medical Officer

Blue Cross and Blue Shield of Montana (BCBSMT) is excited to announce that Dr. JP Maganito has been promoted to chief medical officer (CMO), filling a position vacated by Dr. Monica Berner's recent promotion to president.



JP will be responsible for providing executive medical leadership as a spokesperson on medical affairs and policy. In addition, he will be serving as our primary physician representative to assure effective and efficient delivery of quality medical care consistent with BCBSMT's mission and vision. Previously, JP served as a contract associate medical director from 2012 to 2015, before most recently serving as lead medical director.

He is board certified with the American Osteopathic Board of Obstetrics and Gynecologists and earned his Doctor of Osteopathic Medicine degree from Des Moines University College of Osteopathic Medicine and Surgery. While earning his doctorate, he simultaneously finished his Masters in Public Health and Masters in Healthcare Administration at Des Moines

University College of Health Sciences – Division of Health Management. He's also certified as a health education specialist and computer information specialist, and had subspecialty training as a female pelvic medicine and reconstructive surgery fellow.

After briefly working at Google and before joining BCBSMT, JP moved to Helena in 2011 and served as the staff gynecologist and occupational health medical officer at VA Montana Healthcare System at Fort Harrison, where he also became the women's health medical director.

## Contact Us

Confused about where to go for answers? Use our online Provider contact reference guide to help guide you to the best point of contact for your answer.

<https://www.bcbsmt.com/provider/network-participation/contact-us>

Our *Blue Review* provider newsletter is produced quarterly for participating professional and institutional providers across all lines of business (commercial and government programs). The newsletter serves as a vehicle to communicate **timely, consistent and relevant messaging** related to:

- New products, programs and services available at BCBSMT
- Notification of changes as required by contract or other mandates
- Member initiatives and patient resources

# Medicare Advantage — Discontinued Authorization Requirements Through Evicore Healthcare

Preauthorization (PA) is no longer required for certain services rendered on and after April 1, 2018. This does not apply to services rendered prior to April 1, 2018. While a PA is no longer required, services are still subject to Medical Necessity and coverage criteria for payment. BCBSMT may conduct post-service claim review for the appropriateness of care.

eviCore will discontinue all PA and retrospective Utilization Management (UM) services requested by providers for the medical services identified below.

## DISCONTINUED PREAUTHORIZATION REQUIREMENT FOR THESE SERVICES

### Service Modality

- Ultrasound
- Physical Therapy
- Occupational Therapy
- Speech Therapy
- Chiropractic
- Pain Management
- Sleep Therapy
- Sleep DME

### Membership Impacted

- Montana Individual Medicare HMO
- Montana Individual Medicare PPO
- Montana Group Medicare PPO

Please refer to the BCBSMT Medicare Advantage Discontinued Code List [https://www.bcbsmt.com/static/mt/provider/pdf/news/mt\\_medicare\\_advantage\\_discontinued\\_code\\_list.pdf](https://www.bcbsmt.com/static/mt/provider/pdf/news/mt_medicare_advantage_discontinued_code_list.pdf)

eviCore healthcare (eviCore) is an independent specialty medical benefits management company that provides utilization management services for Blue Cross and Blue Shield of Montana.

## TriWest Contract for Community Care Network (CCN) Delayed

Community Care Network for Department of Veterans Affairs The Department of Veterans Affairs (VA) has notified BCBSMT that it will delay the start of the Region 4 Community Care Network (CCN), which includes the state of Montana.

The VA intends to release another Region 4 CCN procurement in the future. Here is the link to Amendment 19 that announces this change.

**The TriWest provider contract provided to you for the CCN network is still effective, but VA referrals will not be utilized through the CCN program until a later date.**

Should the TriWest program move forward in the future, BCBSMT will contact you with any information or updates. Currently, no TriWest program is active under this contract. You may contact TriWest at **866-286-4174** or by email at [ccnprovider@triwest.com](mailto:ccnprovider@triwest.com) if you have questions.





## Altegra Health Selected for Medical Record Retrieval

BCBSMT is requesting your cooperation by providing access to specific member medical records to facilitate a risk adjustment chart review.

As you may know, risk adjustment is the payment methodology used by the Centers for Medicare and Medicaid Services (CMS) and the Department of Health and Human Services (HHS) for our Medicare Advantage and individual policy members. The purpose of these chart reviews is to verify that information reported to BCBSMT and ultimately to HHS and CMS in claims or encounter data includes all pertinent diagnosis codes at the accurate levels of specificity.

BCBSMT engaged Altegra Health to retrieve medical records selected as part of this chart review. BCBSMT has executed a Business Associate Agreement with Altegra Health and any information shared during this review will be kept in the strictest of confidence, in accordance with all applicable state and federal laws regarding the confidentiality of patient records, including current HIPAA requirements. We would appreciate your cooperation with this medical record review and will work with you to minimize disruptions in patient care activities.

You will have the option to submit medical records via secure email, fax, FedEx, remote electronic medical record (EMR) download or onsite scanning performed by an Altegra Health medical record technician. If your office prefers to establish VPN EMR access with BCBSMT to enable secure, ongoing EMR data transmission for this and/or future medical record requests, please communicate this preference to Altegra Health upon receipt of this request letter.

Should you have any questions regarding this process, please feel free to call the Altegra Health Support Center at **1-855-767-2650**, Monday through Friday, 8 a.m. to 5 p.m., MT. Thank you in advance for your cooperation and for the care and services you provide to our members.

Altegra Health is an independent company that provides records management for Blue Cross and Blue Shield of Montana. Altegra Health does not provide Blue Cross and Blue Shield products or services and is solely responsible for the products or services it provides.

## 2018 Annual Fee Schedule and Compensation Policy Update

Blue Cross and Blue Shield of Montana (BCBSMT) reviews BCBSMT Fee Schedules and Compensation Policies annually for update. Policy updates are published March 1, 2018 and are effective May 1, 2018.

BCBSMT Compensation Policies and Fee Schedules are published on the BCBSMT Secure Provider Portal. For detailed information, please review updated compensation policies published on March 1, 2018, including:

- Ambulance Compensation Policy
- Clinical Laboratory Compensation Policy
- RBRVS Compensation Policy
- RBRVS and Anesthesia Conversion Factors Compensation Policy
- Non-Physician Compensation Policy
- Modifier Compensation and Reference Policy
- Hospital Compensation Policy
- Durable Medical Equipment, Oxygen, Prosthetic/Orthotic and Supplies Compensation Policy
- Telehealth (Virtual Visits) Policy

# Pharmacy Program Updates: Quarterly Pharmacy Changes Effective April 1, 2018

## DRUG LIST CHANGES

Based on the availability of new prescription medications and Prime's National Pharmacy and Therapeutics Committee's review of changes in the pharmaceuticals market, some additions, revisions (drugs still covered but moved to a higher out-of-pocket payment level) and/or exclusions (drugs no longer covered) were made to the BCBSMT drug lists. Your patient(s) may ask you about therapeutic or lower cost alternatives if their medication is affected by one of these changes. Changes that were effective April 1, 2018 are outlined below.

### DRUG LIST UPDATES (COVERAGE ADDITIONS) – AS OF APRIL 1, 2018

Preferred Drug <sup>1</sup>	Drug Class/Condition Used For
<b>Basic, Multi-Tier Basic, Enhanced, Multi-Tier Enhanced Drug Lists</b>	
BENZNIDAZOLE tab 12.5 mg, 100 mg	Chagas Disease
ENBREL MINI	Rheumatoid Arthritis, Plaque Psoriasis
FIASP	Diabetes
FIASP FLEXTOUCH	Diabetes
QVAR REDHALER 40 mcg/act, 80 mcg/act	Asthma
SHINGRIX	Shingles Vaccine
TRACLEER tab for oral susp 32 mg	Pulmonary Arterial Hypertension
ZENPEP dr cap 20000-63000-84000 unit, 40000-126000-168000 unit	Enzyme Deficiency
<b>Basic and Multi-Tier Basic Drug Lists</b>	
APRISO	Ulcerative Colitis
BYDUREON BCISE	Diabetes
LYRICA soln 20 mg/mL	Diabetic Nerve Pain, Fibromyalgia
<b>Performance and Performance Select Drug Lists</b>	
ALUNBRIG tab 90 mg, 180 mg	Cancer
ALUNBRIG tab initiation therapy pack 90 mg, 180 mg	Cancer
APRISO	Ulcerative Colitis
atazanavir sulfate cap 150 mg, 200 mg, 300 mg	HIV
BAXDELA	Anti-infective
BENZNIDAZOLE tab 12.5 mg, 100 mg	Chagas Disease
BEVYXXA cap 40 mg, 80 mg	VTE Prophylaxis/Anticoagulant
BOSULIF tab 400 mg	Cancer
BYDUREON BCISE	Diabetes
CALQUENCE	Cancer
efavirenz cap 50 mg, 200 mg	HIV
ENDARI	Sickle Cell Disease
estradiol vaginal cream 0.1 mg/gm	Menopause Vaginal Changes
ezetimibe-simvastatin tab 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg	High Cholesterol
FIASP	Diabetes
FIASP FLEXTOUCH	Diabetes
JULUCA	HIV

– CONTINUED ON PAGE NEXT PAGE

Preferred Drug <sup>1</sup>	Drug Class/Condition Used For
<b>Performance and Performance Select Drug Lists</b>	
K-PHOS tab 500 mg	Phosphate Deficiency
K-PHOS NO 2 tab 305-700 mg	Phosphate Deficiency
NEULASTA ONPRO KIT	Neutropenia
oseltamivir phosphate for susp 6 mg/mL	Influenza
PREVYMIS tab 240 mg, 480 mg	CMV
QVAR REDHALER 40 mcg/act, 80 mcg/act	Asthma
SHINGRIX	Shingles Vaccine
SYMPROIC	Opioid-Induced Constipation
tenofovir disoproxil fumarate tab 300 mg	HIV
TRACLEER tab for oral susp 32 mg	Pulmonary Arterial Hypertension
VERZENIO tab 50 mg, 100 mg, 150 mg, 200 mg	Cancer
VIDEX EC	HIV
XIGDUO XR	Diabetes
ZENPEP dr cap 20000-63000-84000 unit, 40000-126000-168000 unit	Enzyme Deficiency
<b>Performance Select Drug List</b>	
QUILLICHEW ER 20 mg, 30 mg, 40 mg	ADHD
QUILLIVANT XR	ADHD
SOLIQUA 100/33	Diabetes
XULTOPHY 100/3.6	Diabetes
ZUBSOLV tab 0.7-0.18 mg, 1.4-0.36 mg, 2.9-0.71 mg, 5.7-1.4 mg, 8.6-2.1 mg, 11.4-2.9 mg	Opioid Dependence

**DRUG LIST UPDATES (REVISIONS/EXCLUSIONS) – AS OF APRIL 1, 2018**

Preferred Brand <sup>1</sup>	Drug Class/Condition Used For	Generic Preferred Alternative(s) <sup>2</sup>	Preferred Brand Alternative(s) <sup>1,2</sup>
<b>Basic Drug List Revisions</b>			
AXIRON (testosterone td soln 30 mg/act)	Low Testosterone	Generic equivalent available. Members should talk to their doctor or pharmacist about other medication(s) available for their condition.	
NASONEX (mometasone furoate nasal susp 50 mcg/act)	Allergic Rhinitis	Generic equivalent available. Members should talk to their doctor or pharmacist about other medication(s) available for their condition.	
PENTASA (mesalamine cap er 250 mg, 500 mg)	Ulcerative Colitis	N/A	APRISO, ASACOL HD, DELZICOL
RENVELA (sevelamer carbonate packet 0.8 gm, 2.4 gm)	Kidney Disease	Generic equivalent available. Members should talk to their doctor or pharmacist about other medication(s) available for their condition.	
SABRIL (vigabatrin powder pack 500 mg)	Infantile Spasms	Generic equivalent available. Members should talk to their doctor or pharmacist about other medication(s) available for their condition.	
VIGAMOX (moxifloxacin hcl ophth soln 0.5%)	Ophthalmic Infections	Generic equivalent available. Members should talk to their doctor or pharmacist about other medication(s) available for their condition.	
ZIAGEN (abacavir sulfate soln 20 mg/mL)	HIV	Generic equivalent available. Members should talk to their doctor or pharmacist about other medication(s) available for their condition.	
Preferred Brand <sup>1</sup>	Drug Class/Condition Used For	Preferred Brand Alternative(s) <sup>1,2</sup>	
<b>Performance and Performance Select Drug Lists Revisions</b>			
AMPICILLIN (ampicillin cap 500 mg)	Infections	amoxicillin capsule, amoxicillin/clavulanate potassium tablet, penicillin tablet	
BROMFENAC (bromfenac sodium ophth soln 0.09%)	Ocular Pain/Inflammation	diclofenac (Ophth) solution, ketorolac (Ophth) solution	
CLARITHROMYCIN (clarithromycin for susp 125 mg/5 mL, 250 mg/5 mL)	Infections	azithromycin suspension, azithromycin tablet, clarithromycin tablet	
FLUOROURACIL (fluorouracil soln 2%, 5%)	Cancer	diclofenac (Ophth) solution, ketorolac (Ophth) solution	

Preferred Brand <sup>1</sup>	Drug Class/Condition Used For	Preferred Brand Alternative(s) <sup>1,2</sup>
<b>Performance and Performance Select Drug Lists Revisions</b>		
FLURBIPROFEN SODIUM (flurbiprofen sodium ophthalmic soln 0.03%)	Ophthalmic Pain/Inflammation	diclofenac (Ophth) solution, ketorolac (Ophth) solution
GENTAK (gentamicin sulfate ophthalmic oint 0.3%)	Ophthalmic Infections	erythromycin (Ophth) oint, gentamicin (Ophth) solution, moxifloxacin (Ophth) solution, tobramycin (Ophth) solution
PENICILLIN V POTASSIUM (penicillin v potassium for soln 125 mg/5 mL, 250 mg/5 mL)	Infections	amoxicillin capsule, amoxicillin suspension, penicillin tablet
<b>Performance and Performance Select Drug Lists Exclusions</b>		
almotriptan malate tab 6.25 mg, 12.5 mg	Migraines	eletriptan tablet, sumatriptan tablet, zolmitriptan tablet
BUPHENYL (sodium phenylbutyrate tab 500 mg)	Urea Cycle Disorders	Generic equivalent available. Members should talk to their doctor or pharmacist about other medication(s) available for their condition.
EFFIENT (prasugrel hcl tab 5 mg, 10 mg)	Cardiovascular Event Prophylaxis	Generic equivalent available. Members should talk to their doctor or pharmacist about other medication(s) available for their condition.
FOSRENOL (lanthanum carbonate chew tab 500 mg, 750 mg, 1000 mg)	Kidney Disease	Generic equivalent available. Members should talk to their doctor or pharmacist about other medication(s) available for their condition.
frovatriptan succinate tab 2.5 mg	Migraines	eletriptan tablet, sumatriptan tablet, zolmitriptan tablet
LAMICTAL STARTER/NOT TAKING CARBAMAZEPINE (lamotrigine tab 25 mg (42) & 100 mg (7) starter kit)	Bipolar Disorder	Generic equivalent available. Members should talk to their doctor or pharmacist about other medication(s) available for their condition.
LAMICTAL STARTER/TAKING CARBAMAZEPINE/NOT TAKING VALPROATE (lamotrigine tab 25 mg (84) & 100 mg (14) starter kit)	Bipolar Disorder	Generic equivalent available. Members should talk to their doctor or pharmacist about other medication(s) available for their condition.
LAMICTAL STARTER/TAKING VALPROATE (lamotrigine tab 25 mg (35) starter kit)	Bipolar Disorder	Generic equivalent available. Members should talk to their doctor or pharmacist about other medication(s) available for their condition.
LEXIVA (fosamprenavir calcium tab 700 mg)	HIV	Generic equivalent available. Members should talk to their doctor or pharmacist about other medication(s) available for their condition.
metformin hcl tab er 24hr osmotic 500 mg, 1000 mg (generic for FORTAMET)	Diabetes	metformin ER tablet (generic for GLUCOPHAGE XR)
MILLIPRED (prednisolone tab 5 mg)	Inflammatory Conditions	prednisolone syrup, prednisone tab
MILLIPRED DP (prednisolone tab therapy pack 5 mg (21), 5 mg (48))	Inflammatory Conditions	prednisolone syrup, prednisone tab
oxiconazole nitrate cream 1%	Fungal Infections	econazole cream 1%, ketoconazole cream 2%, ketoconazole shampoo 2%
PENTASA (mesalamine cap cr 250 mg, 500 mg)	Ulcerative Colitis/Crohn's Disease	APRISO, ASACOL HD, DELZICOL
RELPAK (eletriptan hydrobromide tab 20 mg, 40 mg)	Migraines	Generic equivalent available. Members should talk to their doctor or pharmacist about other medication(s) available for their condition.
SABRIL (vigabatrin powder pack 500 mg)	Infantile Spasms	Generic equivalent available. Members should talk to their doctor or pharmacist about other medication(s) available for their condition.
SYMLINPEN 60 (pramlintide acetate pen-inj 1500 mcg/1.5 mL)	Diabetes	Members should talk to their doctor or pharmacist about other medication(s) available for their condition.
SYMLINPEN 120 (pramlintide acetate pen-inj 2700 mcg/2.7 mL)	Diabetes	Members should talk to their doctor or pharmacist about other medication(s) available for their condition.
TRANSDERM-SCOP (scopolamine td patch 72hr 1 mg/3 days)	Nausea/Vomiting	Generic equivalent available. Members should talk to their doctor or pharmacist about other medication(s) available for their condition.
ZIAGEN (abacavir sulfate soln 20 mg/mL)	HIV	Generic equivalent available. Members should talk to their doctor or pharmacist about other medication(s) available for their condition.
<b>Performance and Performance Select Drug Lists Exclusions</b>		
EPIDUO (adapalene-benzoyl peroxide gel 0.1-2.5%)	Acne	Generic equivalent available. Members should talk to their doctor or pharmacist about other medication(s) available for their condition.
RIOMET (metformin hcl oral soln 500 mg/5 mL)	Diabetes	metformin tablet

## DISPENSING LIMIT CHANGES

The BCBSMT prescription drug benefit program includes coverage limits on certain medications and drug categories. Dispensing limits are based on U.S. Food and Drug Administration (FDA) approved dosage regimens and product labeling.

### Effective April 1, 2018:

Drug Class and Medication(s) <sup>1</sup>	Dispensing Limit(s)
<b>Basic, Performance and Performance Select Drug Lists Changes</b>	
<b>Keveyis</b>	
Keveyis	120 tablets per 30 days
<b>Basic Drug List Changes</b>	
<b>Pseudobulbar Affect</b>	
Nuedexta	60 capsules per 30 days

## UTILIZATION MANAGEMENT PROGRAM CHANGES

**Effective April 1, 2018**, the following changes were applied:

Several drug categories and/or targeted medications will be added to current Prior Authorization (PA) and Step Therapy (ST) programs for standard pharmacy benefit plans. As a reminder, please review your patient's drug list for the indicator listed in the Prior Authorization or Step Therapy column, as not all programs may apply. Additionally, please be sure to submit the specific prior authorization form for the medication being prescribed to your patient.

### DRUG CATEGORIES ADDED TO CURRENT PHARMACY PA STANDARD PROGRAMS, EFFECTIVE APRIL 1, 2018

Drug Category	Targeted Medication(s) <sup>1</sup>
<b>Basic, Performance and Performance Select Drug Lists</b>	
Benlysta	Benlysta
Hereditary Angioedema (HAE)	Haegarda
Keveyis	Keveyis
<b>Basic Drug List</b>	
Pseudobulbar Affect	Nuedexta

### DRUG CATEGORIES ADDED TO CURRENT PHARMACY ST STANDARD PROGRAMS, EFFECTIVE APRIL 1, 2018:

Drug Category	Targeted Medication(s) <sup>1</sup>
<b>Basic Drug List</b>	
Phosphate Binder	Auryxia, Fosrenol, Renegel, Renvela, Velphoro

Per our usual process of member notification prior to implementation, targeted mailings were sent to members affected by drug list revisions and/or exclusions, dispensing limit and prior authorization program changes. For the most up-to-date drug list and list of drug dispensing limits, visit the Pharmacy Program section of our Provider website.

If your patients have any questions about their pharmacy benefits, please advise them to contact the Pharmacy Program number on their member ID card. Members may also visit [bcbsmt.com](http://bcbsmt.com) and log in to Blue Access for Members<sup>SM</sup> (BAM<sup>SM</sup>) and [MyPrime.com](http://MyPrime.com) for a variety of online resources.

<sup>1</sup>Third party brand names are the property of their respective owners

<sup>2</sup>These lists are not all inclusive. Other medications may be available in this drug class.

Prime Therapeutics LLC is a pharmacy benefit management company. BCBSMT contracts with Prime to provide pharmacy benefit management and related other services. BCBSMT, as well as several independent Blue Cross and Blue Shield Plans, has an ownership interest in Prime. MyPrime.com is an online resource offered by Prime Therapeutics.

The information mentioned here is for informational purposes only and is not a substitute for the independent medical judgment of a physician. Physicians are to exercise their own medical judgment. Pharmacy benefits and limits are subject to the terms set forth in the member's certificate of coverage which may vary from the limits set forth above. The listing of any particular drug or classification of drugs is not a guarantee of benefits. Members should refer to their certificate of coverage for more details, including benefits, limitations and exclusions. Regardless of benefits, the final decision about any medication is between the member and their health care provider.



# Interpreting the 'PLB' Segment on the 835 ERA

There are reversals and corrections when claim adjudication results have been modified from a previous report. The method for revision is to reverse the entire claim and resend the modified data. Provider level adjustments are reported in the PLB segment within your Electronic Remittance Advice (835 ERA) from BCBSMT.

Adjustments in the PLB segment can either decrease the payment (**a positive number**) or increase the payment (**a negative number**). The sum of all claim payments (CLP04) minus the sum of all provider level adjustments (in the PLB segment) equals the total payment (BPR02). The information in the PLB segment must be taken into consideration for auto-posting of payments to your patient accounts.

Below are additional details regarding adjustment codes that may appear in the PLB segment, in accordance with the Technical Report Type 3 (TR3)\*. Questions may be directed to our Electronic Commerce Service Center at [ecommerceservices@bcbsmt.com](mailto:ecommerceservices@bcbsmt.com) or **800-746-4614**.

**Please share this important information with your practice management software vendor, and/or your billing service or clearinghouse, if applicable.**

<p><b>C5 – Temporary Allowance</b></p>	<p>This code is used to inform you that we have identified an overpayment of less than \$50. We recommend checking your books to confirm details. You may elect to submit a refund to BCBSMT. If you disagree, overpayment disputes/appeals must be submitted within 90 days from the date of the report.</p> <p><b>Example:</b> PLB*15483NN082*20151231*C5:02015NNNQ3980X00.55NN30940*-2</p> <p>In order to balance this scenario, the debit, credit record, along with the PLB must be processed together. The end result should be \$0.</p>
<p><b>CS – Adjustment</b></p>	<p>This code is used to inform you that we have identified an overpayment of \$50 or more. We recommend checking your books to confirm details. You may elect to submit a refund to BCBSMT, or do nothing, in which case the payment recovery will occur automatically. If you disagree, overpayment disputes/ appeals must be submitted within 90 days from the date of the report.</p> <p><b>Example:</b> PLB*15483NN082*20151231*CS:0201509NN0C85890X00.5NN82101*-1156</p> <p>In order to balance this scenario, the debit, credit record, along with the PLB must be processed together. The end result should be \$0.</p>
<p><b>WO – Overpayment Recovery</b></p>	<p>This code indicates the automatic recovery of a previous payment.</p> <p><b>Example:</b> PLB*154837NN82*20151231*WO: 0201509NN08956B0X.5520NN142*1156*</p>
<p><b>WO – Overpayment Recovery</b> <b>72 – Authorized Return</b> <b>B2 – Rebate</b></p>	<p>This combination is used to acknowledge the return of funds.</p> <p><b>Example:</b> PLB*15483NN082*20151231*72: 0201509NN08956B0X.5520NN142*-14*WO: 0201509NN08956B0X.5520NN142*14*B2: 0201509NN08956B0X.5520NN142*-14</p>

\*The HIPAA mandated ASC X12 Health Care Claim / Payment Advice (835) TR3 is available for purchase on the Washington Publishing Company (WPC) website at [wpc-edi.com](http://wpc-edi.com). WPC is an independent third party vendor that is solely responsible for its products and services.

# Responding to Electronic Quality and Risk Adjustment Medical Record Requests Via Availity™ Provider Portal

BCBSMT is committed to making it easier for providers to do business with us. Providers may now receive electronic quality and risk adjustment medical record requests from BCBSMT. The necessary documentation can be submitted electronically through the Availity Provider portal.

Submitting requested records is easy. Once users have logged into the Availity Web portal, requests for these medical records from BCBSMT will display in the **Notification Center**, providers may then upload and submit medical record documentation using the “Medical Attachments” application. Providers may track and audit their submissions.

To receive and respond to these medical records requests, you must be registered with **Availity**. To enable this feature, administrators must log in select Enrollment Center › Medical Attachments Setup, then enter the required data.

BCBSMT is aiming to integrate payer-provider transactions and processes within providers' daily Availity workflow. We anticipate this new electronic quality and risk adjustment medical records submission capability has the potential to:

- Lessen the administrative burden and inconveniences associated with mailing or faxing medical records
- Reduce delays and frustrations associated with paper submissions
- Lessen in-person visits to retrieve medical records

Mailing and faxing medical records remain options for all participating providers. Network providers who are not Availity users are encouraged to register with [availity.com](http://availity.com) and complete the online application, at no charge.

Becoming a registered Availity user grants access to many other tools and resources, while also allowing you to begin using new payer-provider's business solutions immediately upon launch.

For more information, refer to the **Responding to Electronic Quality and Risk Adjustment Medical Records Requests Tip Sheet** in the Provider Tools/Education and Reference Center at [bcbsmt.com/provider](http://bcbsmt.com/provider). BCBSMT will be providing additional information regarding electronic medical records submissions will be introduced in 2018.

At this time, electronic medical record request and submission process are not available for medical record requests resulting from utilization review activities or the claims adjudication process. We anticipate offering additional capabilities throughout 2018.

Availity is a trademark of Availity, LLC, a separate company that operates a health information network to provide electronic information exchange services to medical professionals. Availity provides administrative services to BCBSMT. BCBSMT makes no endorsement, representations or warranties regarding any products or services provided by third party vendors such as Availity. If you have any questions about the products or services provided by such vendors, you should contact the vendor(s) directly.

## Updated Online NDC Units Calculator Tool Available

Providers treating BCBSMT members now have access to a user-friendly online National Drug Code (NDC) units calculator tool for assistance with converting applicable classified or specified Healthcare Common Procedure Coding System (HCPCS) or Current Procedural Terminology (CPT®) units to NDC units.

RJ Health, an independent third-party specialty drug data company, has provided a newly updated units calculator tool, which is now known as RC Claim Assist™. You may access RC Claim Assist at no cost through the Availity™ Web Portal or through the BCBSMT secure provider portal. If you are a new Availity or secure provider portal user, you will need to select the Register now link. Once registered, you should be able to login. Providers may search for billable NDC Units by HCPCS/ CPT code, by NDC code and/or by Drug Name.

A user guide for RC Claim Assist, as well as updated NDC Billing FAQs and NDC Billing Guidelines will be available soon. These resources will be posted in the Claims and Eligibility/Claim Submission section of our Provider website.

RC Claim Assist™ Copyright 2017 RJ Health Systems International, LLC. RC Claim Assist™ is a product of RJ Health Systems. RJ Health Systems International, LLC is an independent third-party vendor that is solely responsible for its products and services.

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Availity is a trademark of Availity, LLC, a separate company that operates a health information network to provide electronic information exchange services to medical professionals. Availity provides administrative services to BCBSMT.

BCBSMT makes no endorsement, representations or warranties regarding any products or services provided by third party vendors such as Availity and RJ Health Systems International. If you have any questions about the products or services provided by such vendors, you should contact the vendor(s) directly.



## Prime Therapeutics® and Walgreens® Combined Specialty and Home Delivery Pharmacy Services Company Brand Launch Completed Important E-Prescribing Changes

**As previously announced**, the BCBSMT pharmacy benefit manager (PBM), Prime Therapeutics LLC (Prime), and Walgreens' combined specialty and home delivery pharmacy services company was formed in 2017. Headquartered in Orlando, FL., the company's full brand name, AllianceRx Walgreens Prime, has officially launched to consumers as of March 31, 2018.

**There are changes to the submission of electronic prescriptions as a result of this brand change.** A summary of those changes is listed below for your reference. Please take this opportunity to update any pharmacy information that may be stored in your patient records, as well as your e-prescribing contacts. The electronic prescription submissions you may be using currently may be returned as 'unable to fill'.

**Please note:** Updated specialty referral and mail order prescription fax forms, if not submitting electronic prescriptions, will be available on our Provider website soon.

While pharmacy communications, packaging and informational materials have been updated with the new brand, the contact information, pharmacy hours of operation and prior authorization processes remain the same.

### SPECIALTY PHARMACY SERVICES

As of Jan. 1, 2018, the specialty pharmacy started operating under the name AllianceRx Walgreens Prime. Previous names for the specialty pharmacy were Prime Specialty by AllianceRx Walgreens Prime and Prime Therapeutics™ Specialty Pharmacy (Prime Specialty Pharmacy).

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## Select Specialty Medications to Transition to Accredo Specialty Pharmacy – Effective June 1, 2018

May 31, 2018

Beginning June 1, 2018, Accredo®, a full-service specialty pharmacy, will be BCBSMT's preferred in-network provider of select specialty medications covered under the medical benefit for administration to BCBSMT members.

To help ensure a seamless transition, affected patients with active prescriptions (eligible prescriptions with remaining refills) will be systematically transferred from AllianceRx Walgreens Prime to Accredo beginning June 1, 2018. Effective June 1, 2018, AllianceRx Walgreens Prime will be removed from the BCBSMT medical specialty network. AllianceRx Walgreens Prime will continue to be a preferred provider for specialty medications covered under the pharmacy benefit, which are typically FDA-approved for self-administration.

Affected patients with recent medical specialty prescription history at AllianceRx Walgreens Prime will be contacted by Accredo through awareness letters and outreach phone calls. The phone call will confirm appointments and shipping information for the next refill, as well as help set up ongoing care and support services. **Providers with patients affected by this change will be notified via fax.**

**Please note:** Specialty medication coverage is based on the member's benefit. This change does not affect patients whose specialty medication may be covered under their pharmacy benefit. This change also does not affect patients with Medicare Part D or Medicaid coverage. Please call the number on the member's

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**There are changes to the way you will need to e-prescribe:**

- AllianceRx Walgreens Prime has specialty pharmacies located in key regions across the United States. While some restrictions may apply, providers can usually submit the prescription to the location closest to the patient.
- **Note:** Cystic fibrosis specialty prescription referrals may be sent to any of the locations listed below as well as the dedicated cystic fibrosis pharmacy.
- If you are uncertain where to send a prescription, please call AllianceRx Walgreens Prime at **877-627-6337**.

Specialty Pharmacy Address	E-prescribing Pharmacy Name
<p><b>Beaverton, OR</b> 9775 SW Gemini Drive, Suite 1 Beaverton, OR 97008</p>	AllianceRx WALGREENS PRIME-SPEC-OR
<p><b>Canton, MI</b> 41460 Haggerty Circle South Canton, MI 48188</p>	AllianceRx WALGREENS PRIME-SPEC-MI
<p><b>Frisco, TX</b> 10530 John W. Elliott Drive, Suite 100 Frisco, TX 75033</p>	AllianceRx WALGREENS PRIME-SPEC-TX
<p><b>Pittsburgh, PA</b> 130 Enterprise Drive Pittsburgh, PA 15275</p>	AllianceRx WALGREENS PRIME-SPEC-PA
<p><b>Orlando, FL</b> 2354 Commerce Park Drive, #100 Orlando, FL 32819</p>	AllianceRx WALGREENS PRIME-SPEC-FL
<p><b>Cystic fibrosis pharmacy</b> 10530 John W. Elliott Drive, Suite 200 Frisco, TX 75033</p>	AllianceRx WALGREENS PRIME-SPEC-CFS

**HOME DELIVERY SERVICES**

Home delivery pharmacy services have been operating under the name of AllianceRx Walgreens Prime as of March 31, 2018. This pharmacy fills covered 90-day supply home delivery prescriptions. Previous names were PrimeMail by Walgreens Mail Service, Walgreens Mail Service and PrimeMail.

**There are changes to the way you will need to e-prescribe:**

- ALLIANCERX WALGREENS PRIME-MAIL-AZ

Members with recent prescription history were notified of the specialty and/or home delivery pharmacy name changes. If your patients have questions about their pharmacy benefits, please advise them to contact the number on their member ID card. Members may also visit [bcbsmt.com](http://bcbsmt.com) and log in to Blue Access for Members<sup>SM</sup> (BAM<sup>SM</sup>) for a variety of online resources.

Blue Cross and Blue Shield of Montana (BCBSMT) contracts with Prime Therapeutics to provide pharmacy benefit management and related other services. In addition, contracting pharmacies are contracted through Prime Therapeutics. The relationship between BCBSMT and contracting pharmacies is that of independent contractors.

BCBSMT, as well as several independent Blue Cross and Blue Shield Plans, has an ownership interest in Prime Therapeutics.

Prime Therapeutics has an ownership interest in AllianceRx Walgreens Prime, a central specialty pharmacy and home delivery company.

Blue Cross®, Blue Shield® and the Cross and Shield Symbols are registered service marks of the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield Plans.

ID card to verify coverage, or for further assistance or clarification on your patient's benefits, including any prior authorization or predetermination approval that may be required.

**GETTING STARTED WITH ACCREDO**

For patients with expired or no remaining refill prescriptions, providers can submit a new prescription to Accredo. Visit [accredo.com](http://accredo.com) (select Health Care Professionals) for referral forms by therapy and e-prescribing information, or call **1-866-759-1557**. Prior authorization information should be included with each prescription.

**PATIENT CARE AND SUPPORT SERVICES**

Accredo offers personalized care and support services, including:

- Comprehensive access to specialty drug products and clinician-verified dosage and safety recommendations
- 24/7 access to clinician team, plus flexible and convenient delivery to an address of your patient's choice with included supplies
- Care coordination to minimize drug-related adverse episodes or gaps in care
- Assistance with medical insurance benefits, prior authorization and financial assistance coordination
- Specialty trained clinicians at Accredo's Therapeutic Resource Centers<sup>SM</sup> who are skilled in targeted therapy management programs that help to improve adherence, support the health care provider/patient relationship and plan of care, review therapy progress and maintain open communication with the provider and patient

If you have any questions, please call the number on the back of your patient's ID card.

Accredo is an independent specialty pharmacy provider working with BCBSMT. The relationship between BCBSMT and specialty pharmacies is that of independent contractors.

# Quickly, Efficiently Manage and Respond to Coding Opportunities Online Through the Availity® Provider Portal

Maintaining current and comprehensive diagnosis information for BCBSMT members is imperative. BCBSMT utilizes multiple sources of data to identify conditions that a member had in the past, or may currently have, which have not been documented as a diagnosis code on a claim during the current calendar year. In turn, BCBSMT often reaches out to providers to close these potential coding opportunities.

BCBSMT is working to make it easier for you to serve members with on and off-exchange health plans who are subject to quality and risk adjustment. Providers can now electronically respond to potential coding gaps and determine treatment opportunities with the **Claim Encounter Reconciliation Application (CERA)** through the Availity Portal.

This new, easy-to-navigate feature helps improve quality of care and risk adjustment by:

- Providing a more efficient alternative to mailing or faxing medical records
- Reducing delays associated with paper submissions
- Lessening in-person visits to retrieve medical records

Mailing and faxing medical records remain options for providers when responding to requests for quality and risk adjustment purposes. Providers who are not Availity users will continue to receive these requests by mail, fax or in-person visits. If you are not a registered Availity user, you can complete the guided online registration process at [availity.com](http://availity.com) at no charge.

## LEARN MORE ABOUT CERA

Check out this [Getting Started Guide for CERA](#) and our [CERA tip sheet](#) for quick reference and navigational assistance

- With an Availity login you may view the [CERA – Training Demo](#) to understand the setup process and get started working with the tool
- With an Availity login you may view this on-demand webinar: [Claim Encounter Reconciliation Application \(CERA\) Recording](#) for additional learning

If you have any questions, contact Availity Client Services at **800-282-4548**.

Availity users gain access to many useful tools and resources as well as new payer-provider business solutions. For example, with Availity providers can complete a wide range of electronic transactions for BCBSMT patients, such as verifying patient eligibility and benefits, checking claim status, processing a prior authorization, as well as using CERA to evaluate treatment opportunities for quality and risk adjustment purposes.

At this time, electronic medical record request and submission process through CERA are only available for quality and risk adjustment submissions, and are not available for medical record requests resulting from utilization review activities or the claims adjudication process. We anticipate offering additional capabilities throughout 2018.

Availity is a trademark of Availity, LLC, a separate company that operates a health information network to provide electronic information exchange services to medical professionals. Availity provides administrative services to BCBSMT. BCBSMT makes no endorsement, representations or warranties regarding any products or services provided by third-party vendors such as Availity. If you have any questions about the products or services provided by such vendors, you should contact the vendor(s) directly.





## Insurers Required by CMS to Conduct ACA Risk Adjustment Program Audit

In 2018, the Centers for Medicare and Medicaid Services (CMS) will conduct another Initial Validation Audit (IVA) to validate the data used when assessing the payment transfers for the Affordable Care Act's (ACA) Risk Adjustment (RA) program. The provider's role is essential to the success of the IVA. Therefore, if any of your patients are selected to be included in the IVA, BCBSMT is asking for your cooperation and commitment to fulfilling the requirements of the IVA.

The IVA is expected to begin in June 2018 and BCBSMT will be retrieving the requested medical records to submit to IVA auditors. IVA auditors require medical records to validate the sampled member's risk score calculation which is based on the diagnosis codes submitted on a member's claims, as well as through supplemental diagnosis submissions based on medical record review. As BCBSMT providers, you may be asked to provide medical records to validate the diagnosis codes used in the ACA RA risk score calculation. It is of utmost importance that you respond to these requests in a timely manner.

The IVA will be performed on a sample of members enrolled in ACA-compliant individual and small group plans, both on and off-exchange. IVA auditors will validate medical claims of the sampled members from the previous calendar year. For example, this IVA will be conducted in 2018, but will review claims with dates of service in 2017. Please be aware some of these claims may have been paid in 2018 and are likely to be included in the IVA sample.

We understand that this is a very busy time; however, to comply with CMS' requirements, we appreciate your full support and cooperation as you receive requests and deliver the requested medical record(s) in a timely manner. To fulfill the medical record request, you may fax, mail or provide EMR access to retrieve the requested records.

If you have any questions, please contact Adria J. of BCBSMT at **406-437-6521**.



# Availity® Provider Portal: More Functionality with Better Outcomes

Montana providers now have the ability to conduct real-time electronic transactions for BCBSMT patients, at no additional cost through the Availity Portal. Availity includes the same administrative capabilities offered through the Secure Provider Portal®; however, you will have access to even more self-service options in Availity. Listed below is a comparison of the electronic services accessible through the Secure Provider Portal and Availity Portal.

BCBSMT Secure Provider Portal	Availity Portal
Eligibility and Benefit Verification (270)	Eligibility and Benefit Inquiry (270)
Claim Status Verification (276)	Claim Status Inquiry (276)
NDC Unit Calculator Tool (single sign-on access)	NDC Units Calculator Tool (single sign-on access)
Provider Claim Summary View and Print	Remittance Viewer – View and Print (835)
Payer Reports	Portal Reports
Portal Training	Portal Training
	<b>Additional Availity Functionality</b>
	Claim Research Tool (CRT)*
	Reporting On-Demand
	Patient Care Summary
	ERA and Electronic Funds Transfer (EFT) Enrollments
	iExchange (single sign-on access)
	Electronic Provider Access (single sign-on access)
	Electronic Refund Management/Claim Inquiry Resolution*
	BCBSMT Branded Payer Spaces
	Research Procedure Code Edits (single sign-on access)
	Institutional/Professional Claim Data Entry (837)
	Institutional/Professional Direct Claim Send (837)
	Claim and Payer Edits
	Claims Encounter Reconciliation Application (CERA)*
	Medical Record Attachments
	Fee Schedules
	BCBSMT Provider Manuals

\*Claim Research Tool returns BCBSMT payer specific claim details, including line level processing and denial descriptions.

\*CRT and Electronic Refund Management/Claim Inquiry Resolution tools are not available for Medicare Advantage products.

\*CERA is available for BCBSMT members with health insurance marketplace plans only.

Availity provides a single sign-on feature for quick access to iExchange®, NDC Units Calculator Tool, Electronic Provider Access and Research Procedure Code Edits tools. This single sign-on alternative gives providers more security, without the need for another User ID and password.

## JOIN US FOR A WEBINAR!

BCBSMT is hosting weekly educational webinars for new and existing Availity users to learn more about these services. To register for a complimentary webinar visit our [Training](#) page in the Education & Reference section on our website at [bcsmt.com/provider](https://bcsmt.com/provider).

If you are not a registered Availity user, simply go to [availity.com](https://availity.com), select “Register,” and complete the online application today. You may contact Availity Client Services at **800-282-4548** for registration assistance. For more information about BCBSMT transaction via Availity, contact Provider Education Consultant team at [PECS@bcsmt.com](mailto:PECS@bcsmt.com).





## HPV Vaccination = Cancer Prevention

Many people may be unaware that one of the most common causes of cervical and oral cancer can be prevented with a vaccine.

Human papillomavirus (HPV) is a common family of viruses that causes infection of the skin or mucous membranes of various areas of the body. There are over 150 different types of HPV viruses. HPV infections are so common that nearly all men and women will get at least one type of HPV at some point in their lives. Most people never know that they have been infected. In most cases, HPV goes away on its own and does not cause any health problems.

When HPV does not go away, it can cause health problems like genital warts and cancer. In the United States, there are about 39,800 HPV-associated cancers each year, with about 23,300 cancers in women and 16,500 cancers in men.\*

The CDC recommends the HPV vaccine for adolescents at 11 years of age when they are scheduled to receive vaccines for pertussis or meningitis or during other medical visits. Teens or young adults that may have missed that window can still receive the vaccine. Studies have shown the vaccine produces better immunity to fight infection when given at younger ages and has been proven to have no serious side effects.

For more information about HPV and the other teen vaccines, go to [www.immunization.mt.gov](http://www.immunization.mt.gov).

\*Data from <https://www.cdc.gov/cancer/hpv/statistics/index.htm>

## Immunization Changes for Licensed Child Care and Staff

In January 2018, the Department of Public Health and Human Services updated the immunization requirements for children attending a licensed child care and its staff. The update added two vaccines to the requirements for children and slightly changed what is needed for staff. These updates take effect June 1, 2018.

On June 1, besides meeting the current requirements children will also need to have:

- age appropriate doses of Hepatitis B (Hep B) and pneumococcal conjugate vaccine (PCV)
- one dose of varicella vaccine by 16 months rather than by 19 months of age.
- changes were also made to staff immunizations requirements. After the update, staff will need to have:
  - at least one dose of tetanus, diphtheria, and pertussis (Tdap) vaccine and
  - those born in 1957 or later, one dose of measles, mumps, rubella (MMR) vaccine.

Changes were made to better protect children in child care settings against vaccine preventable diseases.

For more information on immunizations and child care contact your local health department or visit <http://dphhs.mt.gov>.





## Montana Colorectal Cancer Roundtable: Success Through Partnership

A small but mighty team of partners from across Montana representing public health, payers, community health centers, and hospitals have convened to improve quality and increase screening for colorectal cancer. On March 23, 2018, the team celebrated the third meeting of its Colorectal Cancer Roundtable, with an agenda packed full of accomplishments, best practices and lessons learned. Since 2014, Montana's colorectal cancer screening rates have increased from 56 percent to 62 percent, with several health systems reporting screening rates of 70 percent or higher.

Roundtable attendees were trained in the American Cancer Society's resources on the latest evidence-based colorectal cancer screening guidelines by the state's chief medical officer. Montana Primary Care Association's dedication to eliminate barriers to provider access to expert resources and education through its Colorectal Cancer "Roadshow". The Roadshow covered 2,000 miles over two-weeks to community health centers. Providers learned how the Quality Improvement Organization (QIO) adopted FluFIT to complement its influenza vaccine performance measure, how payers are engaging patients, and how hospitals and public health are partnering to increase screening follow-up through patient navigation.

The Roundtable team's results are evidence of the value, and success available through dedicated collaboration, and genuine partnership.

Emily Coyle, MPH | Health Systems Manager, State-Based

The editors and staff of *Blue Review* welcome letters to the editor. Address letters to:

### **BLUE REVIEW**

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