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# 2018 BCBSGa Provider Town Hall meeting schedule update

Published: Jun 14, 2018 - Administrative

As announced in the February 2018 edition of the BCBSGa *Network Update*, we will continue hosting in person Town Hall style provider orientation meetings throughout 2018. There have been a few updates to the schedule and while the schedule is subject to change, at this time we plan to have the following Provider Town Hall meetings:

## **June 12, 2018 – Athens**

St. Mary's Healthcare System  
Flowers Suite  
1230 Baxter Street  
Athens, GA. 30607

10:00 a.m. – 11:30 a.m.  
Breakfast will be provided

Please R.S.V.P. by **Tuesday, June 5th** to [RSVPBlue@bcbsga.com](mailto:RSVPBlue@bcbsga.com). Include the name of the facility or practice, and the number of attendees

## **July 17, 2018 – Gainesville**

Gainesville Civic Center  
830 Green Street N.E.  
Gainesville, GA. 30501

11:30 a.m. – 1:00 p.m.  
Lunch will be provided

Please R.S.V.P. by **Tuesday, July 9th** to [RSVPBlue@bcbsga.com](mailto:RSVPBlue@bcbsga.com). Include the name of the facility or practice, and the number of attendees

## **September 6, 2018 – Savannah**

Candler Hospital  
The Marsh Auditorium  
5353 Reynolds Street  
Savannah, GA. 31405

1:00 p.m. – 3:00 p.m.  
Refreshments will be provided

Please R.S.V.P. by **Friday, August 31st** to [RSVPBlue@bcbsga.com](mailto:RSVPBlue@bcbsga.com). Include the name of the facility or practice, and the number of attendees

**November 13, 2018 – Atlanta**

DeKalb Medical Theatre

(Use the A Elevators to go to the ground floor, turn left and follow the signs for the Theatre/Auditorium)

2701 North Decatur Road

Decatur GA 30030

10:00 a.m. – 12:00 p.m.

Breakfast will be served

Please R.S.V.P. by **Wednesday, November 7th** to [RSVPBlue@bcbsga.com](mailto:RSVPBlue@bcbsga.com). Include the name of the facility or practice, and the number of attendees

**URL:** <https://providernews.anthem.com/georgia/article/2018-bcbsga-provider-town-hall-meeting-schedule-update>

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## **Availity Webinar Schedule**

Published: Jun 14, 2018 - **Administrative**

In response to provider feedback, and as part of our commitment to support and enable providers, we are pleased to provide Availity overview training. Please plan to attend one of the two upcoming webinars and learn more on the following:

- Eligibility & Benefits
- Claim Inquiry
- Remittances
- Interactive Care Review (ICR)

Webinars are scheduled for June 21st and October 17th from 1:00 p.m. – 2:00 p.m.

June 21, 2018 from 1:00 p.m. - 2:00 p.m.

[RSVP here](#)

October 17th from 1:00 p.m. – 2:00 p.m.

[RSVP here](#)

URL: <https://providernews.anthem.com/georgia/article/availity-webinar-schedule>

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## Availity is now our designated EDI Gateway

Published: Jun 14, 2018 - Administrative

BCBSGa has recently moved into a strategic partnership with Availity to serve as our designated EDI Gateway and E-solutions Service Desk.

- Availity and BCBSGa are working together to develop new ways to simplify how you manage claims and other administrative tasks online.
- Beginning June 1st 2018 you will be able to manage all changes and new setup requests for the electronic remittance advice (835) through the Availity Portal.
- To register or manage account changes for electronic funds transfers (EFT) only, please continue to use the EnrollHub at <https://solutions.caqh.org>
- If you directly submit your electronic transactions to Anthem (Brand) and have your own practice management software, Availity provides trading partner services and access to Portal tools through an easy setup experience.
- If you use a clearinghouse, they will work with Availity on your behalf.

### Next Steps If you are a Direct Submitter:

Existing Availity Account	New Availity Account
Go to <a href="https://www.availity.com">Availity.com</a> , click LOGIN, and log in to your account.	If you are not registered for Availity go to <a href="https://www.availity.com">Availity.com</a> and click the <a href="#">REGISTER</a> button. Refer to this <a href="#">quick guide</a> if you need help.
Under the <a href="#">My Providers</a> , click <a href="#">Enrollments Center</a> .	Select the registration process that is appropriate to your organizational type.
Click <a href="#">ERA Enrollment</a> and then follow the online instructions to complete and submit your enrollment.	Availity will send you follow-up emails with your login credentials and guidance for your next steps.

After submitting, you will be notified by e-mail that enrollment is complete and start receiving 835's through Availity. Please allow 5-10 business days for processing.

At this point you will be able to utilize all the Availity benefits such as Claim Status, Eligibility and now EDI.

#### Key Factors:

- You will be able to manage changes or new registrations for the electronic remittance advice (835) through your Availity Portal account beginning June 1st 2018. We encourage you to register with Availity to initiate the change to the Availity EDI Gateway.
- BCBSGa and Availity are committed to transparency with this change, and will emphasize the continuity of quality service to our trading partners.

We look forward to delivering a smooth transition to Availity for our EDI services.

If you have any questions or concerns please contact the E-Solutions service desk at 1-800-470-9630 or Availity at 1-800-AVAILITY (282-4548)

**URL:** <https://providernews.anthem.com/georgia/article/availity-is-now-our-designated-edi-gateway-1>

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## Ambulatory Surgery Center Services and Publix Members

Published: Jun 14, 2018 - **Administrative**

Publix members who have services performed at an Ambulatory Surgery Center (ASC) will have a significantly lower out-of-pocket cost than having the same services performed at a hospital's outpatient center. ASC health care facilities can provide surgery as well as certain pain management and diagnostic services, such as colonoscopies, at a much lower member out-of-pocket cost.

Publix members' cost will be a \$100 copay for covered services at an ASC that is a Blue Cross Blue Shield PPO provider. Publix members who have the same service performed at an in-network hospital's outpatient facility and have not met their out-of-pocket cost for the year must satisfy their calendar year deductible and applicable coinsurance.

**URL:** <https://providernews.anthem.com/georgia/article/ambulatory-surgery-center-services-and-publix-members>

## Verifying eligibility for expanded hospice benefits

Published: Jun 14, 2018 - Administrative

In the [April 2018 edition of the Network Update](#), BCBSGa announced an expansion of hospice benefits for local BCBSGa fully insured plans to begin on June 1, 2018. The newly expanded benefits allow for disease modifying treatments to continue alongside hospice services, as well as member access to hospice services with prognoses of up to 12 months.

Providers should verify whether members have the expanded hospice benefit under their BCBSGa policy.

For some health plans, updated benefit information will return via an electronic eligibility and benefit inquiry on the Availity Portal or using your Electronic Data Interchange (EDI) interface as early as June 1, 2018. We anticipate that all impacted plans will return the updated language by August 1, 2018. Once updated, hospice inquiries (Service Type 45) will confirm access to the expanded hospice benefit by returning: ***“LIFE EXPECTANCY UP TO 12 MONTHS WITH DISEASE MODIFYING TREATMENT ALLOWED.”***

It may be necessary for providers to contact the Provider Service number on the back of the member ID card to confirm if a member’s plan includes the expanded hospice benefits from June 1, 2018 - August 1, 2018, before all systems are updated to report the more detailed benefit language.

As a reminder, the following plans include the expanded hospice benefits beginning June 1, 2018: Commercial fully-insured group and individual plans. The following plans *do not* include expanded hospice benefits: self-insured plans, Medicare, Medicaid, and FEP.

URL: <https://providernews.anthem.com/georgia/article/verifying-eligibility-for-expanded-hospice-benefits-1>

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## Receive Direct Deposit of Patient Payments with Healthcare Bill Payments

Published: Jun 14, 2018 - Administrative

Beginning July 1, 2018, many BCBSGa members will be able to make payments to providers for their out-of-pocket expenses with Healthcare Bill Payments, a new feature via

the member portal at [bcbsga.com](http://bcbsga.com). Now, your patients can quickly and easily pay you online as soon as their claim information is available.

BCBSGa has engaged with [InstaMed®](#), a healthcare payments network, to offer Healthcare Bill Payments. InstaMed is a Payment Card Industry (PCI) Level One Service Provider and certified at the highest levels for both healthcare and payment processing.

Providers registered with InstaMed will conveniently receive patient payments by direct deposit into their bank account without ever mailing a patient bill or making a phone call.

Plus, patients enjoy a simple, convenient payment option.

[Registration for Healthcare Bill Payments](#) is simple – you can get started today. Here's what you'll need:

- Email address
- Tax ID number for your organization
- Bank account information for direct deposit

If you are not registered, these payments are mailed to you as prepaid Mastercard® payments.

For more information about Healthcare Bill Payments:

- [Register](#) to attend InstaMed's upcoming informational webinar on June 14, 2018 at 1:00 pm ET.
- Read more about [Healthcare Bill Payments](#).
- See [InstaMed's Frequently Asked Questions](#).
- Email questions about Healthcare Bill Payments to [connect@instamed.com](mailto:connect@instamed.com).

This feature does not apply to BCBSGa Medicare and Medicaid plans, but may be implemented in the future.

URL: <https://providernews.anthem.com/georgia/article/receive-direct-deposit-of-patient-payments-with-healthcare-bill-payments-1>

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## Reminder – Miscellaneous durable medical equipment billing guidelines

Published: Jun 14, 2018 - Administrative

BCBSGa continually evaluates coding and billing patterns, and recently identified trends



related to the use of code E1399 — DME, miscellaneous. When an appropriate code exists for DME equipment or supply, the more specific code should be used.

Inappropriate use of code E1399 often includes, but is not limited to the following:

- Gait trainers (E8001/E8002)
- Shower chairs (E0240)
- Standing frames (E0641)
- Hospital beds (E0250-E0373)
- Stand assist lifts (E0635)

To ensure proper use of E1399, BCBSGa conduct post-payment reviews of code E1399. If a more appropriate code should have been used, BCBSGa may recoup overpayments accordingly.

BCBSGa continues to require prior authorization for the use of miscellaneous code E1399. If a prior authorization is approved but the claim is submitted with the incorrect code E1399, then the claim may be denied and a corrected claim will need to be resubmitted with the appropriate HCPCS code.

URL: <https://providernews.anthem.com/georgia/article/reminder-miscellaneous-durable-medical-equipment-billing-guidelines-1>

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## Clinical Practice and Preventive Health guidelines available on the web

Published: Jun 14, 2018 - **Administrative**

As part of our commitment to provide you with the latest clinical information and educational materials, we have adopted nationally recognized medical, behavioral health, and preventive health guidelines, which are available to providers on our website. The guidelines, which are used for our Quality programs, are based on reasonable medical evidence, and are reviewed for content accuracy, current primary sources, the newest technological advances and recent medical research. All guidelines are reviewed annually, and updated as needed. The current [guidelines](#) are available on the [Health & Wellness page](#) of our provider [website](#).

## Update to claim processing for services requiring AIM prior authorization

Published: Jun 14, 2018 - Products & Programs

BCBSGa recently discovered that some claims with services under the following programs are processing without the required prior authorization through AIM Specialty Health® (AIM), a separate company:

- Sleep Management
- Radiology Oncology
- Radiology Benefit Management (RBM)
- Cardiology

Effective July 1, 2018, our claims systems will be updated to correct this issue.

Claims for Sleep Management, Radiology Oncology, Radiology Benefit Management (RBM), and Cardiology services continue to require precertification through AIM. For a list of the codes that require prior authorization, visit the [AIM ProviderPortal<sup>SM</sup>](#).

As a reminder, please submit prior authorization requests to AIM in one of the following ways:

- Access AIM **ProviderPortal<sup>SM</sup>** directly at [providerportal.com](http://providerportal.com). Online access is available 24/7 to process orders in real-time, and is the fastest and most convenient way to request authorization.
- Access AIM via the Availity Web Portal at [availity.com](http://availity.com)
- Call the AIM Contact Center toll-free number: 866-714-1103, Monday–Friday, 8:00 a.m.–6:00 p.m. ET.

## BCBSGa expands Specialty Pharmacy Clinical Site of Care (Level of Care) drug list

Published: Jun 14, 2018 - Products & Programs

Effective for dates of service on and after September 1, 2018, the following specialty pharmacy codes from new or current medical policies or clinical UM guidelines will be included in our existing specialty pharmacy level of care review process.

BCBSGa's level of care prior authorization clinical review of these specialty pharmacy drugs will be managed by AIM Specialty Health® (AIM), a separate company.

View the [Clinical Site of Care \(Level of Care\) drug list](#) and [Clinical Site of Care \(Level of Care\) prior authorization clinical review FAQs](#) for more information.

Medical Policy or Clinical Guideline	Drug	Code
CG-DRUG-09	Cuvitru™	J1555
DRUG.00081	Exondys 51™	J1428
CG-DRUG-78	Fibryga®	J7178
DRUG.00093	Kanuma™	J2840
CG-DRUG-44	Krystexxa®	J2507
CG-DRUG-05	Mircera®	J0888
DRUG.00095	Ocrevus™	J2350
DRUG.00027	Prialt®	J2278
CG-DRUG-78	Rebinyn®	J7195
CG-DRUG-69	Stelara®	J3358
CG-DRUG-61	Supprelin LA®	J9226
CG-DRUG-16	Zarxio®	Q5101

URL: <https://providernews.anthem.com/georgia/article/bcbsga-expands-specialty-pharmacy-clinical-site-of-care-level-of-care-drug-list>

## BCBSGa's Individualized Care Program to support palliative care for commercial members

Published: Jun 14, 2018 - Products & Programs

Beginning June 1, 2018, BCBSGa will offer an Individualized Care Program to our fully insured commercial members to provide palliative care support for members with advanced illness in the last 12 months of life.

This program does not replace the care of PCPs and specialists, but provides an extra layer of support with an interdisciplinary team that includes palliative care physicians, palliative care nurse practitioners, registered nurses, social workers, chaplains and patient care coordinators.

Specific palliative care services include:

- Comprehensive assessments including symptoms, spiritual and psychosocial needs
- Expert symptom management
- Supporting patients in defining their goals, values and preferences and in advance care planning
- Encouraging patients to execute advance directives
- 24/7 access to urgent clinical support from an palliative care team member
- Securing needed resources
- Education on palliative services and hospice care services

An initial telephonic outreach to identified members will be made by a palliative care professional to introduce BCBSGa's Individualized Care Program and to determine the appropriate level of palliative services in one of the following three models:

Telehealth services and support at routine intervals to patients by palliative trained providers.

Home based visits by a palliative care nurse practitioner, supported by an interdisciplinary team of palliative providers for patients with a high symptom burden, increased risk of hospitalization, or other complex issues. The home based visits will be offered through a BCBSGa partnership with Aspire Health (available in certain geographic areas).

Clinic based services offered through a BCBSGa partnership with Aspire Health. Aspire's palliative care team will be embedded within the outpatient clinic/practice of the member's medical oncologist to provide services to targeted patients (available in certain geographic areas)

Aspire Health already provides services for members with advanced illness enrolled in our Medicare and Medicaid health plans and has demonstrated improvement in quality and cost of care savings.

If you are a BCBSGa contracted network provider, an Aspire Health palliative physician may reach out to your practice to introduce themselves in order to establish a physician to physician relationship. They may also discuss developing an individualized mechanism by which to share information regarding patients that have been identified for palliative care services. Aspire will provide clinical updates to your practice on a regular basis to facilitate the best possible co-management of your patient.

If you have questions regarding BCBSGa's Individualized Care Program, please email [IndividualizedCareProgram-PalliativeCare@anthem.com](mailto:IndividualizedCareProgram-PalliativeCare@anthem.com).

URL: <https://providernews.anthem.com/georgia/article/bcbsgas-individualized-care-program-to-support-palliative-care-for-commercial-members>

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## BCBSGa expands specialty pharmacy prior authorization list

Published: Jun 14, 2018 - **Products & Programs** / Pharmacy

Effective for dates of service on and after September 1, 2018, the following specialty pharmacy codes from new or current medical policies or clinical UM guidelines will be included in our prior authorization review process.

BCBSGa's prior authorization clinical review of these specialty pharmacy drugs will be managed by AIM Specialty Health® (AIM), a separate company.

The following clinical guidelines or medical policies will be effective September 1, 2018:

Medical Policy or Clinical Guideline	Code	Drug	Comments
CG-DRUG-44	J2507	Krystexxa®	Existing Guideline
CG-DRUG-89	J3490 Q9991 Q9992	Sublocade™	New Drug to Existing

## Guideline

URL: <https://providernews.anthem.com/georgia/article/bcbsga-expands-specialty-pharmacy-prior-authorization-list>

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### **Reminder: BCBSGa accepts prior authorization requests for prescription medications online**

Published: Jun 14, 2018 - **Products & Programs** / Pharmacy

As a reminder, BCBSGa accepts electronic medication prior authorization requests for commercial health plans. This feature reduces processing time and helps determine coverage quicker. Some prescriptions are even approved in real time so that your patients can fill a prescription without delay.

Electronic prior authorization (ePA) offers many benefits to providers:

- More efficient review process
- Ability to identify if a prior authorization is required
- Able to see consolidated view of ePA submissions in real time
- Faster turnaround times
- A renewal program that allows for improved continuity of care for members with maintenance medications. Prior authorizations are preloaded for the provider before the expiration date.

Providers can submit ePA requests by logging in at [covermy meds.com](http://covermy meds.com). Creating an account is FREE.

For questions, please contact the provider service number on the back of the member ID card.

URL: <https://providernews.anthem.com/georgia/article/reminder-bcbsga-accepts-prior-authorization-requests-for-prescription-medications-online>

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### **Pharmacy information available on anthem.com**

Published: Jun 14, 2018 - **Products & Programs** / Pharmacy

For more information on copayment/coinsurance requirements and their applicable drug classes, drug lists and changes, prior authorization criteria, procedures for generic substitution, therapeutic interchange, step therapy or other management methods subject to prescribing decisions, and any other requirements, restrictions, or limitations that apply to using certain drugs, visit [anthem.com/pharmacyinformation](http://anthem.com/pharmacyinformation). The commercial and marketplace drug lists are posted to the web site quarterly (the first of the month for January, April, July and October).

To locate “Marketplace Select Formulary” and pharmacy information, go to Customer Support, select your state, Download Forms and choose “Select Drug List. This drug list is also reviewed and updated regularly as needed.

*FEP Pharmacy updates and other pharmacy related information may be accessed at [fepblue.org](http://fepblue.org) > Pharmacy Benefits.*

Effective 1/1/18, AllianceRX Walgreens Prime is the new specialty pharmacy program for the Federal Employee Program. You can view the [2018 Specialty Drug List](#) or call us at 1-888-346-3731 for more information.

URL: <https://providernews.anthem.com/georgia/article/pharmacy-information-available-on-anthemcom>

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## Updates to AIM Musculoskeletal Program Clinical Appropriateness Guidelines

Published: Jun 14, 2018 - Policy Updates

Beginning with dates of service on and after July 1, 2018, the following updates will apply to AIM **Musculoskeletal Program** Clinical Appropriateness Guidelines:

### **Spine Surgery guideline:**

Cervical decompression with or without fusion:

- Added osteotomy and corpectomy definitions
- Clarified implant/instrumentation failure

Lumbar fusion and treatment of spinal deformity (including scoliosis and kyphosis):

- Added osteotomy and corpectomy definitions

Spinal stenosis:

- Removed bilateral or wide decompression

### **Interventional Pain Management guideline:**

Epidural injection procedures and diagnostic selective nerve root blocks:

- Added prior authorization exemption for CPT codes 62320 and 62322 when used for post-procedural pain with certain ICD-10-CM diagnoses

Repeat therapeutic epidural steroid injections, clarified initial injection as therapeutic:

- Clarified injection sessions for procedural requirements

Paravertebral facet injection/nerve block/neurolysis:

- Increased procedural limitation for diagnostic medial branch blocks
- Increased procedural limitation for therapeutic intraarticular facet joint injections and clarified requirement for conservative treatment between injections

Sacroiliac joint injections:

- Added HCPCS code G0260

Ordering and servicing providers may submit prior authorization requests to AIM in one of the following ways:

- Access AIM **ProviderPortal**SM directly at [providerportal.com](http://providerportal.com). Online access is available 24/7 to process orders in real-time, and is the fastest and most convenient way to request authorization.
- Access AIM via the Availity Web Portal at [availity.com](http://availity.com)
- Call the AIM Contact Center toll-free number: 1-866-714-1103, Monday–Friday, 8:00 a.m.–6:00 p.m. ET

For questions related to guidelines, please contact AIM via email at [aim.guidelines@aimspecialtyhealth.com](mailto:aim.guidelines@aimspecialtyhealth.com). Additionally, you may access and download a copy of the current guidelines [here](#).



## Coverage Guideline not implemented - Cervical Cancer Screening Using Cytology and Human Papillomavirus Testing (CG-MED-53)

Published: Jun 14, 2018 - Policy Updates

In the [October 2017 edition of the Network Update](#), BCBSGa announced a new coverage guideline, Cervical Cancer Screening Using Cytology and Human Papillomavirus Testing (CG-MED-53) to be effective January 1, 2018. Please be advised that CG-MED-53 was not implemented.

URL: <https://providernews.anthem.com/georgia/article/coverage-guideline-not-implemented-cervical-cancer-screening-using-cytology-and-human-papillomavirus-testing-cg-med-53-1>

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## BCBSGa Adopts MCG Care Guidelines for Behavioral Health Services

Published: Jun 14, 2018 - Policy Updates

Effective with dates of service on and after October 31, 2018, BCBSGa will begin using MCG Care Guidelines 22<sup>nd</sup> edition Behavioral Health guidelines for the review of behavioral health services. This represents a change from the behavioral health medical policies and clinical guidelines currently used.

Please note that the following behavioral health (BEH) medical policies and clinical guidelines will be retained at this time:

- BEH.00002 Transcranial Magnetic Stimulation
- BEH.00004 Activity Therapy for Autism Spectrum Disorders and Rett Syndrome
- CG-BEH-01 Screening and Assessment for Autism Spectrum Disorders and Rett Syndrome
- CG-BEH-02 Adaptive Behavioral Treatment for Autism Spectrum Disorder
- CG-BEH-14 Intensive In-Home Behavioral Health Services

BCBSGa may continue to use additional medical policies and clinical guidelines to supplement MCG Care Guidelines.

View [BCBSGa's medical policies and clinical guidelines](#) and view Customizations to [MCG Care Guidelines 22<sup>nd</sup> edition](#).

[This change](#) impacts BCBSGa's Commercial health plans.

Providers should continue to call the phone number indicated on the back of the member ID card to request prior authorization review or for additional questions regarding behavioral health benefits.

**URL:** <https://providernews.anthem.com/georgia/article/bcbsga-adopts-mcg-care-guidelines-for-behavioral-health-services>

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## **6/01/18 Notification of Preapproval List Changes (Including Non-AIM and moving to AIM)**

Published: Jun 14, 2018 - **Policy Updates**

Preapproval changes are listed below. For additional information, you can access the complete GA Standard Preapproval List, GA Standard Preapproval CODE List and the GA Standard Adopted Clinical Guideline List by using the links below.

- [Georgia Standard Preapproval List](#)
- [Georgia Standard Preapproval CODE List](#)
- [Georgia Standard Adopted Clinical Guideline List](#)

[Notification of Preapproval changes chart](#)

**URL:** <https://providernews.anthem.com/georgia/article/60118-notification-of-preapproval-list-changes-including-non-aim-and-moving-to-aim>

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# Medical Policy and Clinical Guideline Updates 4/1/2018

Published: Jun 14, 2018 - Policy Updates

The Medical Policy and Technology Assessment Committee adopted the following new and/or revised Medical Policies and Clinical Guidelines. Some may have expanded rationales, medical necessity indications or criteria and some may involve changes to policy position statements that might result in services that previously were covered being found to be either not medically necessary or investigational/not medically necessary. [Clinical Guidelines](#) adopted by BCBSGa and all the [Medical Policies](#) are available on our [bcbsga.com](http://bcbsga.com) provider website. Please note that our medical policies now include NOC (Not Otherwise Classified) codes to expedite the process of determining services that may require medical review. If you do not have access to the internet, you may request a hard copy of a specific Medical or Behavioral Health Policy or Clinical UM Guideline by calling Provider Services at (800) 241-7475 Monday through Friday from 8:00 a.m. to 7:00 p.m. or send written requests (specifying the medical policy or guideline of interest, your name and address to where the information should be sent) to:

Blue Cross and Blue Shield of Georgia and Blue Cross Blue Shield Healthcare Plan of Georgia

Attention: Prior Approval, Mail Code GAG009-0002

3350 Peachtree Road NE

Atlanta, GA 30326

**NOTE:** Any Clinical Guideline included in this standard MPTAC notification is only effective for GA if included on the [GA Standard Adopted Clinical Guideline List](#) unless there is a Group-specific review requirement in which case it will be considered 'Adopted' for that group only and for the specific type of review required. Additionally, as part of the Pre-Payment Review Program for commercial or Federal Employee Health Benefits Program (FEHBP) plans, Clinical Guidelines approved by Medical Policy and Technology Assessment Committee (MPTAC) but not included in the [GA Standard Adopted Clinical Guideline List](#) may be used to review a provider's claims when a provider's billing practices are not consistent with other providers in terms of frequency or in some other manner or for provider education and are "Adopted" for those purposes.

[Medical policy and clinical guideline updates 2Q18 chart](#)

**URL:** <https://providernews.anthem.com/georgia/article/medical-policy-and-clinical-guideline-updates-412018>

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## Review of Reimbursement Policies – Professional

Published: Jun 14, 2018 - Policy Updates

The following professional reimbursement policies received a review and may have minor language changes; however, the changes do not cause significant changes to the policies' position or criteria:

- Documentation Reporting Guidelines for Consultations
- Duplicate Reporting of Diagnostic Services
- Frequency Editing
- Overhead Expense for Office Based Surgery and Diagnostic Testing
- Sleep Studies and Related Bundled Services & Supplies
- Unit Frequency Maximums for Drugs and Biologic Substances

URL: <https://providernews.anthem.com/georgia/article/review-of-reimbursement-policies-professional-1>

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## Reimbursement Policy Reminder - Durable Medical Equipment (Professional)

Published: Jun 14, 2018 - Policy Updates

In the [April 2016 edition of the Network Update](#), BCBSGa shared details about the professional reimbursement policy, Durable Medical Equipment. The following information provides important reminders about this policy.

Certain DME is not routinely purchased up-front; rent-to-purchase durable medical equipment (DME) is eligible for rental reimbursement up to the purchase price or 10 months rental, whichever comes first. We are receiving claims billed with up-front purchases and we are denying those claims because they must be billed as rent-to-purchase. If you receive such a denial, please do not request a medical necessity review, as that was not the reason for the denial. Instead, please bill claims for these services correctly as rent-to-purchase.

As a reminder, for dates of service on or after July 1, 2016, the following HCPCS codes for sleep apnea equipment are only eligible for reimbursement when reported as rented items and should not be reported with DME purchase modifiers NR (New when rented (use the NR

when DME was new at the time of rental is subsequently purchased)), NU (new equipment), or UE (used durable medical equipment).:

- E0470 (respiratory assist device, bi-level pressure capability, without backup rate feature)
- E0471 (respiratory assist device, bi-level pressure capability, with back-up rate feature)
- E0561 (humidifier, non-heated, used with positive airway pressure device)
- E0562 (humidifier, heated, used with positive airway pressure device)
- E0601 (continuous positive airway pressure (CPAP) device)

For more information about this policy, visit our [Reimbursement Policy](#) page on our [bcbsga.com](http://bcbsga.com) provider website.

**URL:** <https://providernews.anthem.com/georgia/article/reimbursement-policy-reminder-durable-medical-equipment-professional-1>

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## **Reimbursement Policy Update - New Pharmaceutical Waste Facility Reimbursement Policy effective September 1, 2018 – Facility**

Published: Jun 14, 2018 - **Policy Updates**

As part of our ongoing commitment to share reimbursement policies with you, we've posted a Pharmaceutical Waste Facility Reimbursement Policy to our website that will become effective for dates of service on and after September 1, 2018.

To view this and other facility reimbursement policies, visit our [Reimbursement Policy](#) page on our [bcbsga.com](http://bcbsga.com) provider website.

**URL:** <https://providernews.anthem.com/georgia/article/reimbursement-policy-update-new-pharmaceutical-waste-facility-reimbursement-policy-effective-september-1-2018-facility>

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# Reimbursement Policy Update – Diagnosis-Related Group Newborn Inpatient Stays (Facility)

Published: Jun 14, 2018 - Policy Updates

Effective for dates of service on and after September 1, 2018, BCBSGa will implement the new facility reimbursement policy, Diagnosis-Related Group (DRG) Newborn Inpatient Stays.

The following details provide important information about this policy:

- All newborn inpatient stays must include sufficient documentation or prior authorization to support
- an admission to a level of care area beyond the newborn nursery, such as the Neonatal Intensive Care Unit (NICU), or for the higher level of care associated with more complex newborn DRG.
- Newborn claims submitted for a higher level of care DRG that do not include the appropriate documentation, or those submitted with only newborn care revenue codes (170 and 171) and no prior authorization will be automatically processed based on the normal newborn rate.
- Current prior authorization guidelines for normal newborn and higher level of care newborn inpatient stays apply.

BCBSGa has created a new remark code to help provide additional detail in the above mentioned claim scenarios. The explanation, “*Claim did not meet criteria for higher DRG payment. Level of care adjustment has been made. Claim paid at Normal Newborn DRG.*” will appear on the provider remit when a claim is submitted with a higher level of care newborn DRG code and the required documentation or prior authorization is not on file. Providers may appeal decisions related to the DRG Newborn Inpatient Stays policy by following their normal appeal process and submitting the appropriate supporting clinical documentation.

To view this and other facility reimbursement policies, visit our [Reimbursement Policy](#) page on our [bcbsga.com](http://bcbsga.com) provider website.

**URL:** <https://providernews.anthem.com/georgia/article/reimbursement-policy-update-diagnosis-related-group-newborn-inpatient-stays-facility>

## **Cologuard covered for Medicare Advantage**

Published: Jun 14, 2018 - **State & Federal** / Medicare

*Please note, this notice is only applicable to Medicare Advantage members:* Cologuard, that at-home colorectal cancer screening, is covered at 100 percent for BCBSGa Medicare Advantage individual and group-sponsored members. Members will not incur an out-of-pocket cost for the screening and no prior authorization is required.

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**URL:** <https://providernews.anthem.com/georgia/article/cologuard-covered-for-medicare-advantage-1>

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## **Peer-to-peer process can help clarify clinical record**

Published: Jun 14, 2018 - **State & Federal** / Medicare

The Medicare peer-to-peer process facilitates a conversation between a provider and a BCBSGa medical director. The peer-to-process should be used to explain or clarify something that a clinical record cannot convey. To learn how to initiate a peer-to-peer conversation, please see [Important Medicare Advantage Updates](#) at [bcbsga/medicareprovider](http://bcbsga/medicareprovider).

**URL:** <https://providernews.anthem.com/georgia/article/peer-to-peer-process-can-help-clarify-clinical-record-2>

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## **Motion Picture Industry Pension and Health Plans Offers Medicare Advantage Option**

Published: Jun 14, 2018 - **State & Federal** / Medicare

Effective July 1, 2018, BCBSGa will be a Medicare Advantage (MA) plan option for Motion Picture Industry Health and Pension Plans (MPI). BCBSGa will provide medical benefits for MPI retirees through a Local Preferred Provider Organization (LPPO) product. The MA plan offers the same hospital and medical benefits that Medicare covers. In addition, MPI retirees will pay the same cost share for both in-network and out-of-network services. The MA plan also covers additional benefits that Medicare does not such as hearing,

acupuncture, LiveHealth Online and SilverSneakers.

MPI retirees will have a customized identification card that includes the MPI logo. The prefix on their cards will be MBL. Providers will follow their normal claim filing procedures for MPI member claims.

**URL:** <https://providernews.anthem.com/georgia/article/motion-picture-industry-pension-and-health-plans-offers-medicare-advantage-option-2>

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## **MA home health network to be delegated to myNEXUS**

Published: Jun 14, 2018 - **State & Federal** / Medicare

We want to thank our PCPs and hospitals for their coordination of home health care for our members. We want to alert you to important changes to our Home Health provider network for most of our Medicare Advantage members. BCBSGa will delegate its provider network for Home Health Care Services for most of our Medicare Advantage members to myNEXUS Aug. 1, 2018. Additional information will be available at [Important Medicare Advantage Updates](#) at [bcbsga/medicareprovider](http://bcbsga/medicareprovider).

**URL:** <https://providernews.anthem.com/georgia/article/ma-home-health-network-to-be-delegated-to-mynexus-2>

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## **Medication adherence incentive offered to EPHC providers**

Published: Jun 14, 2018 - **State & Federal** / Medicare

Medication non-adherence increases mortality and costs the healthcare system billions of dollars per year. Anthem is collaborating with physicians engaged in our Enhanced Personal Health Care (EPHC) programs to promote adherence by increasing 90-day supply prescriptions. Patients who receive 90-day supplies are more likely to be adherent, and Anthem's Medicare Advantage plans allow 90-day supplies to be filled for chronic medications at any retail pharmacy. Beginning in July, EPHC providers program will receive a monthly report that identifies Medicare members eligible for a 90-day supply. Please evaluate that member list and discuss the benefits of a 90-day supply with your patients.

**URL:** <https://providernews.anthem.com/georgia/article/medication-adherence-incentive-offered-to-ephc-providers-2>



## Keep up with Medicare news

Published: Jun 14, 2018 - **State & Federal** / Medicare

Please continue to check [Important Medicare Advantage Updates](#) at [bcbsga/medicareprovider](#), including:

- [Updated: Prior authorizations required for new group-sponsored MA membership](#)
- [BCBSGA adopts MCG care guidelines 22nd edition](#)
  
- [Improve Medicare Advantage members' medication adherence with 90-day prescriptions](#)
- [Prior authorization requirements for cardiovascular services](#)
- [Medicare Advantage reimbursement policy provider bulletin](#)
- [Medicare risk adjustment and documentation training](#)
- [Dual Eligible Special Needs Plans – provider training required](#)
- [Prior authorization requirement for Electrical Stimulation Device](#)
- [Prior authorization requirements for part B drugs: Zevalin and Eptacog](#)
- [Prior authorization requirements for Part B drug: Trelstar](#)

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**URL:** <https://providernews.anthem.com/georgia/article/keep-up-with-medicare-news-2>

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