Provider Newsletter

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Provider surveys

Each year, we reach out to ask what we are doing well and how we can continue to improve our services. We use this feedback to continually improve our operations and strengthen our relationship with our providers.
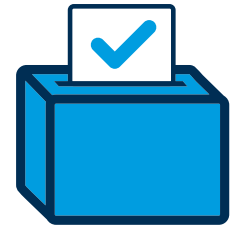
Thank you for participating in our network, for providing quality health care to our members and for your timely completion of any surveys you receive.

BLA-NL-0093-18/BLA-NL-0119-19

Pharmacy benefit manager change to IngenioRx
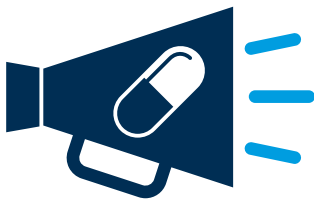
Effective May 1, 2019, IngenioRx will become the pharmacy benefit manager (PBM) for prescription drugs for Healthy Blue members. Because Healthy Blue and IngenioRx are both Anthem, Inc. companies, your patients gain fast, easy access to their health and prescription benefits in one place.

Transferring prescriptions
Patients filling prescriptions at a retail pharmacy can continue, in most cases, using their same retail pharmacy. Patients receiving specialty drugs from Accredo, can request a transfer of their prescriptions to IngenioRx Specialty Pharmacy or take a new prescription to any in-network pharmacy. A specialty drug is classified as a drug used for a rare disease or requires special handling. These drugs are not commonly available at a retail pharmacies.

If your patients currently use home delivery and would like to continue receiving their medication through the home delivery program, they can call the Pharmacy Member Services number on their member ID card. If a patient is currently using home delivery and would prefer to use a retail pharmacy for their medication, they should call the Pharmacy Member Services number on their ID card for assistance.

Each of our members currently receiving medications through Express Scripts Mail Order Pharmacy or Accredo Specialty Pharmacy will receive a letter from Healthy Blue explaining the changes described above. If your patients have questions that are not addressed or need assistance transferring their prescriptions, they can call the Pharmacy Member Services anytime at **1-833-207-3114** (TTY **711**). We're available 24 hours, 7 days a week.

More information coming soon
We will send additional information from Healthy Blue regarding this transition to the new PBM. If you have questions about this change, contact your local Provider Relations representative or call Provider Services at **1-844-521-6942**.

IngenioRx, Inc. is an independent company providing pharmacy benefit management services on behalf of Healthy Blue.

BLA-NL-0116-19

Healthy Blue

Access patient-specific drug benefit information through electronic medical records

Providers can access real-time, patient-specific prescription drug benefit information at the point of care. It is part of the e-prescribing process, and is located within a provider's electronic medical record (EMR) system.

This functionality helps providers determine prescription coverage quicker by sharing information about patient drug cost, formulary and coverage alerts such as prior authorization before sending a prescription to the pharmacy. This information can help providers proactively identify barriers to medication compliance.

Providers can find the following patient-specific prescription benefit information with their EMR system:

- Formulary status of selected medication
- Pricing of medication at a retail and mail order pharmacy
- Formulary alternatives
- Coverage alerts such as prior authorization, step therapy, quantity limits, age limits, etc.

Providers should contact their Information Technology (IT) department or EMR system customer support with questions regarding access to real-time prescription drug benefit functionality. Upgrades to EMR software may be required.

BLA-NL-0103-18

Practitioners' rights during credentialing process

The credentialing process must be completed before a practitioner begins seeing members and enters into a contractual relationship with a health care insurer. As part of our credentialing process, practitioners have certain rights, as briefly outlined below.

Practitioners can request to:
- Review information submitted to support their credentialing application.
- Correct erroneous information regarding a credentialing application.
- Be notified of the status of credentialing or recredentialing applications.

The Council for Affordable Quality Healthcare (CAQH®) universal credentialing process is used for all providers who contract with Healthy Blue. To apply for credentialing with Healthy Blue, go to the **CAQH website** and select **CAQH ProView™**. There is no application fee.

We encourage practitioners to begin the credentialing process as soon as possible when new physicians join a practice. Doing so will help minimize any disruptions to the practice and members' claims.

CAHPS® is a registered trademark of the Agency for Healthcare Research and Quality (AHRQ).

BLA-NL-0093-18/BLA-NL-0119-19

Healthy Blue

Latest updates to Electronic Data Interchange Gateway migration

Healthy Blue designated **Availity** to operate and serve as the electronic data interchange (EDI) entry point — also called the EDI Gateway. The EDI Gateway is a no-cost option for providers who choose to submit their own EDI claims to Healthy Blue. Those who prefer to use a clearinghouse or billing company should work with them to ensure connectivity.

Note, it is required that all trading partners who currently submit directly to the Healthy Blue EDI Gateway transition to the Availity EDI Gateway.

Do you already have an Availity user ID and login?
You can use the same login for your EDI transactions with Healthy Blue.

Becoming a trading partner with Availity
If you wish to become a direct trading partner with Availity, the setup is easy. Use the **Availity Welcome Application** to begin the process of connecting to the Availity EDI Gateway for your EDI transmissions with Healthy Blue.

835 Electronic Remittance Advices (*ERA*)
Use Availity to register and manage account changes for *ERA*. If you previously registered to receive *ERA*, you must register using Availity to manage account changes. To enroll for *835 ERA* delivery, log in to Availity and select My Providers > Enrollments Center > ERA Enrollment.

Electronic funds transfers (EFT)
To register or manage account changes for EFT, use the **EnrollHub**™ — a CAQH Solutions™ enrollment tool and secure electronic EFT registration platform. This tool eliminates the need for paper registration, reduces administrative time and costs, and allows you to register with multiple payers at one time.

Need assistance?
- To access live and on-demand resources created just for you, log in to Availity and select **Help & Training | Get Trained**. In the *Availity Learning Center*, search for **song** in the Catalog.
- The **Availity Quick Start Guide** can assist you with any EDI connection questions you may have.
- If you have additional questions, contact Availity Client Services at **1-800-AVAILITY** (**1-800-282-4548**) Monday through Friday between 8 a.m. and 7:30 p.m. ET.

Healthy Blue

Coding Spotlight: Cancer
A provider's guide to properly code cancers

Cancer is often coded inaccurately, and there are missed opportunities to show which patients are sicker and are at a higher risk and those that are no longer being treated for this chronic condition.

Documentation and coding of neoplasms has proven over time to be a source of many errors, including incorrect assignment of the morphology of the diagnosis and active cancer versus historical cancer. Neoplasms are classified in ICD-10-CM by anatomical location and morphology. It is essential to document the specific site of cancer and laterality. Words like "mass", "lump" and "tumor" should be avoided if more specific language is available. If known, the behavior of the neoplasm should be documented, such as benign, primary malignant, secondary malignant, in situ or uncertain.

"History of malignant neoplasm" or "no evidence of disease" should not be documented if the neoplasm is still being actively treated. Instead, the continuation of care should be documented, noting what has been done and what is left to do.

"History of" and "no evidence of disease" indicate an eradicated condition and a complete cure, according to coding guidelines, and would result in a history of malignant neoplasm code instead of an active malignant neoplasm code.

Read more online.

BLA-NL-0105-18

Important information regarding 17P coverage

Healthy Blue launched a program to ensure physicians are aware of members who may benefit from 17 alpha-hydroxyprogesterone caproate (17P). You will receive an alert that lists members on your panel identified through our high-risk screening survey as potential candidates for 17P.

Each alert will include information on ordering 17P. This is an optional service — You may request to discontinue receiving these alerts at any time.

After reviewing your patient's obstetrical history and drug indications, if you wish to prescribe this medication for your patient, please follow these steps:

- For in-office administration of 17P, no prior authorization is required. Contact either of the pharmacies below to obtain 17P:
  - Accredo Specialty Pharmacy:
    Phone: **1-888-347-3416**
    Fax: **1-877-231-8302**
  - Walgreens Specialty Pharmacy:
    Phone: **1-888-347-3416**
    Fax: **1-877-231-8302**
- For home health administration, contact Optum OB Homecare at **1-800-999-2106**.

BLA-NL-0104-18

Healthy Blue

Help prevent preeclampsia with prenatal aspirin

Preeclampsia is one of four types of hypertensive disorders of pregnancy. It is defined as the development of hypertension with either proteinuria or end-organ dysfunction with onset after 20 weeks of gestation in a previously normotensive woman.
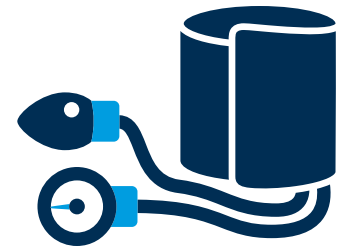
Preeclampsia facts:

- The exact incidence of preeclampsia is unknown.
- Preeclampsia is reported to affect 5% to 10% of pregnancies, with rates in the United States increasing (*ACOG Comm Op #638*, September 2015, Reaffirmed, 2017).
- Preeclampsia is one of the leading causes of maternal morbidity and mortality, accounting for 15.9% of the approximately 700 pregnancy-related deaths in the United States.
- Non-Hispanic Black women experience mortality rates 3 to 4 times that of non-Hispanic White women (*CDC Advancing the Health of Mothers in the 21st Century At A Glance*, 2016).

Tips for providers:

- Prenatal aspirin and home blood pressure monitors are covered benefits for our members.
- Prescriptions for aspirin avoid out-of-pocket costs for members.
- Prescriptions for automatic, digital, home-use blood pressure monitors (with appropriately sized cuffs), along with proper instruction encourage members to identify preeclampsia early.
- Education on normal blood pressure range during pregnancy empowers members to partner with you in their prenatal care.

Read more online.

BLA-NL-0106-18

Healthy Blue

Policy Update
Claims Requiring Additional Documentation
(Policy 06-031, effective 07/01/2019)

Professional providers and facilities are required to submit additional documentation for adjudication of applicable types of claims. If the required documentation is not submitted, the claim may be denied. Healthy Blue may request additional documentation or notify the provider or facility of additional documentation required for claims, subject to contractual obligations.

Effective July 1, 2019, if an itemized bill is requested and/or required, then it must include the appropriate revenue code for each individual charge.

For additional information, please review the Claims Requiring Additional Documentation reimbursement policy at **https://providers.healthybluela.com**.

BLA-NL-0052-18

Healthy Blue