

September 2021

# BlueBlast<sup>SM</sup>

*News Providers Can Use*



 **Healthy Blue<sup>SM</sup>**  
BlueChoice® HealthPlan of SC

Healthy Connections 



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All Providers

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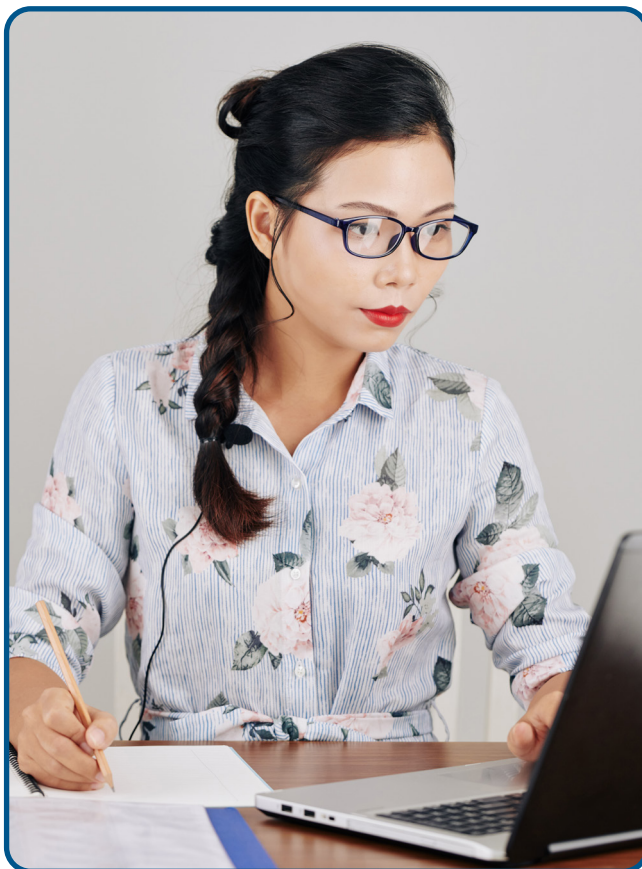
## 2021 Healthy Blue Annual Provider Training

Registration is **NOW OPEN** for the 2021 Healthy Blue Annual Provider Training. The sessions will be held virtually via Microsoft Teams, and you can choose to attend one of the following dates:

• Oct. 5 **SOLD OUT**

- Oct. 6
- Oct. 7
- Oct. 12
- Oct. 13
- Oct. 14

All sessions will be held from 9 a.m. to noon and will provide you with changes and new initiatives for the upcoming year. You do not want to miss out. [Sign up](#) for one of the free sessions today. We look forward to your participation!



## Provider Satisfaction Survey

How is Provider Relations and Education doing? Is there anything we need to work on? Next month you will receive the annual Provider Satisfaction Survey. This will give you a chance to let us know how things are going, if there are any improvements and more.

Your feedback is greatly appreciated and helps Provider Relations and Education better serve you going forward.



 [fb.me/HealthyBlueSC](https://fb.me/HealthyBlueSC)

 [@CoachBlueSC](https://www.instagram.com/CoachBlueSC)

 [@HealthyBlueSC](https://twitter.com/HealthyBlueSC)

## Affirmative Statement Concerning Utilization Management Decisions

All associates who make utilization management (UM) decisions are required to adhere to the following principles:

- UM decision making is based only on appropriateness of care and service and existence of coverage.
- We do not reward practitioners or other individuals for issuing denials of coverage or care. Decisions about hiring, promoting or terminating practitioners or other staff are not based on the likelihood or perceived likelihood that they support or tend to support denials of benefits.
- Financial incentives for UM decision-makers do not encourage decisions that result in underutilization or create barriers to care and service.



If you have any questions about this communication, call the Customer Care Center at **866-757-8286**.

## American Imaging Management Update

Effective Oct. 1, 2021, Healthy Blue providers in South Carolina will need to call the new number for American Imaging Management Specialty Health (AIM) inquiries, **877-202-4239**. AIM is an independent company providing utilization review services on behalf of BlueChoice® HealthPlan.



## Reminder: 2021 Quality Incentive Program

To improve the health of our members, Healthy Blue has designated the following incentives for 2021:

- Notification of pregnancy: \$200  
> Available once per pregnancy
- Well-child visit: \$30
- Centering: up to \$475
- Screening, brief intervention and referral to treatment (SBIRT): \$24, \$48  
> Available once per year for screening and twice for brief intervention
- CPT® Category II reimbursement: \$20 per code
- Sports physicals: \$30



## Medical Drug Benefit Clinical Criteria Updates

On Aug. 21, 2020, and May 21, 2021, the Pharmacy and Therapeutic (P&T) Committee approved the clinical criteria applicable to the medical drug benefit for Healthy Blue. These policies were developed, revised or reviewed to support clinical coding edits.

Visit the [Clinical Criteria](#) website to search for specific policies. If you have questions or would like additional information, use this [email](#).

Please see the explanation for each category of clinical criteria below:

- “New” notates newly published criteria.
- “Revised” means there was an addition or removal of medical necessity requirements or a new document number.
- Updates marked with an asterisk (\*) notate the criteria may be perceived as more restrictive.

Please share this notice with other members of your practice and office staff.

**Note:** *The clinical criteria apply only to the medical drug benefits contained within the member’s medical policy. This does not apply to pharmacy services.*



## 90-Day Validation Requirements

Provider demographic data can change frequently throughout the year and in our networks. To make sure our members know where to find the right physicians or facilities for the care they need, it is vital that we validate the accuracy of their contact information regularly. As part of the No Surprises Act set to go into effect **Jan. 1, 2022**, providers are required to verify and/or update their demographic data at least **every 90 days**. This includes both individual physicians and facilities.

Providers should complete validations using M.D. Checkup, which is in My Insurance Manager<sup>SM</sup>, within 90 days of their last validation. If more than 90 days has passed since the provider’s last validation, we are required to remove them from our directories.

Providers can also use M.D. Checkup if they need to make updates. Once changes have been made, we will have our directories updated with the new data within two business days of receipt.



BlueChoice HealthPlan is an independent licensee of the Blue Cross Blue Shield Association. BlueChoice HealthPlan has contracted with Amerigroup Partnership Plan LLC, an independent company, for services to support administration of Healthy Connections. Amerigroup Corporation, an independent company, administers utilization management services for BlueChoice HealthPlan.

Some links in this newsletter lead to third-party sites. Those organizations are solely responsible for the content and privacy policies on these sites.

The codes listed are for informational purposes only and are not intended to suggest or guide reimbursement. If applicable, refer to your provider contract or health plan contact for reimbursement information.

To report fraud, call our confidential Fraud Hotline at 877-725-2702. You may also call the South Carolina Department of Health and Human Services Fraud Hotline at 888-364-3224 or email [fraudres@scdhhs.gov](mailto:fraudres@scdhhs.gov).