

PROVIDER BULLETIN

PROVIDER INFORMATION



May 1, 2019

2019 Renewal Changes Summary for Blue Plus Referral Health Professional Providers

The purpose of this Blue Cross and Blue Shield of Minnesota, Blue Plus, and Affiliates (Blue Plus) Bulletin is to communicate substantive changes to the 2019 Blue Plus Referral Health Professional Provider Service Agreement (Agreement). The complete Agreement is modified periodically to reflect the most current regulatory changes and other clarifications necessary to properly administer the Agreement. The minor changes and clarifications to the Agreement effective July 1, 2019 are detailed below. The summary items are listed in order of appearance in the Agreement.

Provider Service Agreement Changes

- 1) **Article II.B. The definition of “Agreement”** has been revised to more clearly reference Medical and Behavioral Health Policies (available at bluecrossmn.com) as components of an Agreement.
- 2) **Article II.H. The definition of “Minnesota Health Care Programs”** has been expanded to include Families and Children as a prepaid public program.
- 3) **Article IV.I. Subscriber Liability** provision has been clarified to reflect that the Provider shall abide by all applicable statutes and requirements with respect to collection and return of deductibles and coinsurance amounts.
- 4) **Article VII.A. Insurance** provision has been expanded to further clarify that evidence of coverage requirements for Providers is detailed in the Credentialing Policy and Procedure Manual.
- 5) **Article X.B. Termination.** The third sentence in the opening paragraph has been revised to indicate that written notice of termination must be sent “via certified mail” to Blue Plus.
- 6) **Article XII.A. Confidentiality Requirements.** (Section 3) has been further clarified to include reference to Minnesota Statutes 62J.81.
- 7) **Article XIII.N. Provider Merger or Acquisition.** The following sentence has been added to support prompt notification of material changes: “Notification of any material business transactions, such as a merger or acquisition, must be provided to Blue Plus no later than 60 days prior to the finalization of the transaction.”

No changes have been made to the Medicare Amendment.

Disclosure of Ownership

A Disclosure of Ownership form must be completed and submitted **annually** to Blue Plus per Minnesota Department of Human Services requirements. Information about the requirement and an electronic version of the form are available at bluecrossmn.com.

Reimbursement

Participating Providers may request a list of applicable rate allowances by emailing a request to Fee.Schedule.Allowance.Request@bluecrossmn.com up to twice annually. Your request must include the participating provider's NPI(s) and Blue Plus Internal Reference Number(s).

Questions?

If you have any questions about the changes made in 2019, please call Provider Services at **651-662-5200** or **1-800-262-0820**. If you would like to receive a comprehensive copy of a new Agreement that reflects these changes, please email a request to the following address: Request.Contract.Renewal@bluecrossmn.com