

PROVIDER QUICK POINTS

PROVIDER INFORMATION



January 22, 2020

Blue Cross Blue Shield National Coordination of CareSM Overview

A new Blue Cross Blue Shield (BCBS) National Coordination of Care program to support BCBS Medicare Advantage (MA) members launched nationally on **January 1, 2020**. This program aims to increase the quality of members' care by enabling all BCBS MA members to receive appropriate care wherever they access care.

To better support all BCBS MA PPO members residing in Minnesota, Blue Cross and Blue Shield of Minnesota (Blue Cross) will work with providers to improve these members' care through:

- Supporting providers with additional information about open gaps in care
- Requesting medical records to give Blue Plans a complete understanding of their members' health status

MA PPO members incorporated into this program can be identified by a Minnesota address and the following logo included on their Blue Cross ID Card:



Reminder: Providers are required to respond to requests in support of risk adjustment, HEDIS and other government required activities within the requested timeframe. This includes requests from Blue Cross related to this program.

Medical Record Requests

Providers may receive medical records requests from Blue Cross related to this program. However, providers may be contacted for medical records requests that are not a part of this program.

Gap Closure Requests

You may receive an increase in Stars and Risk Adjustment gap closure requests from Blue Cross for your patients which may result in greater contact with these members—whether it is through onsite visits or via phone outreach—and may allow for greater continuity in care.

HIPAA/Privacy

Blue Cross abides by all HIPAA and any other applicable laws and regulations to preserve the confidentiality of protected health information (PHI). You will only receive requests from Blue Cross that are permissible under applicable law and, patient-authorized information releases are not required for medical records requests or closure of Stars and/or risk adjustment gaps.

Additional Member Care & Administrative Reminders

Annual Wellness Visits

The annual wellness visit (AWV) is a yearly preventive visit emphasizing health screenings and wellness planning. AWVs include a wide range of preventive services and assessments, like Health Risk Assessments, physical

measurements, depression screening, and advance care planning. AWWs increase access to preventive services, reduce healthcare costs, and increase provider revenue.

Blue Cross provides your organization with a report about members who have received an Annual Wellness Visit. We also provide ongoing lists of members who have not received their annual wellness visit and ask that you outreach to these members to schedule this important visit.

Documentation Required for Care Gap Closure

Blue Cross provides your organization with performance reporting for specified preventive screening and chronic condition management measures. The performance rate reports are accompanied by a list of members with care gaps in the specified measures. We ask that you outreach to these members to schedule the services necessary to close the care gap.

Blue Cross provides detailed specifications for each measure which outlines the measure denominator/numerator and best practices for closure. We encourage our providers to access these measure resources on our Availity Learning Center, an engaging and learning-rich environment that can be accessed at your convenience through a secure website, <https://bcbsmn.availitylearningcenter.com>.

Member Experience

Blue Cross continues to work closely with our provider network to ensure appropriate access to services that support our members' health related quality of life and reduce barriers to care.

Performance Metrics and Tools

Blue Cross provides monthly reporting to network providers participating in our Value Based Program. This performance reporting includes a composite score of the 13 preventive screening and chronic condition management measures included in the Medicare Star Ratings Program. Participating providers receive this information for their attributed membership on a monthly basis. Additionally, beginning in 2020, participating providers will be able to access their reports via a sFTP site.

Medicare Risk Adjustment

Blue Cross provides significant provider resources to our provider community, including but not limited to webinars/microlearning's/CEU's/CME's, which can be accessed on our Availity Learning Center, an engaging and learning-rich environment that can be accessed at your convenience through a secure website, <https://bcbsmn.availitylearningcenter.com>.

Importance of Coding Accuracy

Correct diagnostic coding is essential to understanding the member's illness complexity and ensuring that accurate and appropriate care is delivered to all members. Since chronic conditions are not likely to resolve over the long term, accurate coding is crucial to assure proper long-term care is delivered.

Questions?

If you have questions, please contact provider services at **(651) 662-5200** or **1-800-262-0820**.