

# PROVIDER QUICK POINTS

## PROVIDER INFORMATION



December 8, 2016

### **Update: Change to Apogee Employer Group**

Effective January 1, 2017, Blue Cross and Blue Shield of Minnesota (Blue Cross) will be the claim administrator for the Apogee Enterprises, Inc. Employer group. For the calendar years 2014 and 2015, Apogee has been administered through Highmark Business Alliance (Highmark Blue Cross Blue Shield of Pennsylvania) for operational services including claims administration under the alpha prefixes NAP and OAP.

Effective January 1, 2017, and after, the alpha prefixes for Apogee Employer group members will be YAP and AMF.

#### **For claims with a 2016 date of service (alpha prefixes NAP and OAP)**

Minnesota providers must submit the claims to Minnesota as a BlueCard claim. Minnesota will price the claims based on the Minnesota provider agreement and will send claims to Highmark to apply the benefits.

Providers located outside Minnesota, including providers in counties that border Minnesota, must submit claims to their local Blue Plan as a BlueCard claim. The local plan will price the claims based on their provider agreement and will send claims to Highmark to apply the benefits.

#### **For claims with a 2017 date of service (alpha prefixes YAP and AMF)**

Minnesota providers, including providers in counties that border Minnesota, must submit the claims to Minnesota as they do with all other Minnesota claims.

Providers located outside Minnesota must submit claims to their local Blue Plan as a BlueCard claim. The local plan will price the claims based on their provider agreement and will send claims to Minnesota to apply the benefits.

Effective January 1, 2017, Blue Cross will be providing all functions of claim management including, but not limited to, medical policy, pre-authorizations (PA's), pre-certifications, preadmission notifications (PAN's) and appeals.

To view medical policy and pre-authorization information go to **providers.bluecrossmn.com** and follow the steps below:

1. Under Tools and Resources, select "Medical Policy"
2. Read and accept the Medical Policy Statement
3. To obtain medical policy information, select "+" next to "Medical and Behavioral Health Policies" **OR**
4. Select "+" next to "Utilization Management" to obtain pre-certification/pre-authorization information

### **Questions regarding this change?**

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