

PROVIDER BULLETIN

PROVIDER INFORMATION



December 1, 2023

Additional Information for Minnesota Health Care Programs (MHCP) Operations Transitioning back to Blue Cross, effective January 1, 2024

As communicated in **Provider QuickPoint QP95-22 Minnesota Health Care Programs Operations Transition**, and **Provider Bulletin P77-23 Minnesota Health Care Programs (MHCP) Operations Transitioning back to Blue Cross, effective January 1, 2024**, Blue Cross and Blue Shield of Minnesota and Blue Plus (Blue Cross) will be transitioning Minnesota Health Care Programs (MHCP) Operations back to Blue Cross as of January 1, 2024.

Blue Cross has established a landing page on the website for all documents and information related to the transition: <https://www.bluecrossmn.com/providers/migration-minnesota-health-care-programs-mhcp>

Prior Authorizations (PA)

The list of services, procedure codes and associated policies or criteria requiring PA beginning on January 1, 2024, has been published on the MHCP migration landing page. Providers will find the Families & Children, MinnesotaCare (MNCare), and Minnesota Senior Care Plus (MSC+) along with the Minnesota Senior Health Options (MSHO) PA list under the heading titled "Prior Authorizations and Notifications". Please note that there is a separate PA list for MSHO subscribers.

Provider Webinars

Blue Cross will be hosting MHCP Provider Webinars in December. The webinars will be available through the Availity platform. Providers are encouraged to register for one of the sessions.

MHCP Provider Information Session

December 5, 2023, from 9-10:30 am CST

https://availity.zoom.us/webinar/register/WN_qpBB6ubsT0K6wkGyyGM-Aw

MHCP Provider Information Session

December 14, 2023, from 1-2:30 pm CST

https://availity.zoom.us/webinar/register/WN_SBTpdTasRc6Diuxgxo1g1Q

Updated Sample ID Cards

Please note that providers may see a slight variation after final testing and approvals are complete.

Blue Advantage – no copay and copay

BlueCross BlueShield BluePlus **Blue Advantage**

Name: **ROBERT TEST**

ID: **MQG8800000000**

Group Number	MNCAID01
Plan ID	PMAP0002
Medicaid ID	800000000

Svc Types	Med, Rx, Dental	Care Type	MN HLTH Care Program
Office Visit Copay	NONE	Dental Network	Minnesota Select Dental
ER Copay	NONE	Dental Copay	NONE
Non-ER Copay	NONE	RX Bin	610455
EyeGlasses Copay	NONE	RX PCN	MCAIDMN
Brand Name Copay	NONE		
Generic Copay	NONE		
Rx Network	C		

BlueCross BlueShield BluePlus bluecrossmn.com/publicprograms

Members: Authorization not required for emergency care. For appeals or grievances, call the applicable number or write to an address below.

Delta Dental of Minnesota
Professional Services Appeals & Grievances
P.O. Box 30416, Lansing, MI 48909
Blue Plus Appeals and Grievances
P.O. Box 982816
El Paso, TX 79998-2816

DHS Appeals Unit
P.O. Box 64941
St. Paul, MN 55164-0941

Providers: Submit claims to the local Blue Cross and/or Blue Shield plan.

Blue Plus
P.O. Box 982816
El Paso, TX 79998-2816

Member Services: 1-800-711-9862
Behavioral Health: 1-888-275-3974
Prescription Questions: 1-844-765-5939
Nurse Line: 1-888-275-3974
DHS Ombudsperson: 1-651-431-2660
Provider Services: 1-866-518-8448
Pharmacist Only: 1-844-765-5940
Delta Dental of MN: 1-800-774-9049
Quitting Tobacco Program: 1-888-662-2583
Blue Ride: 1-866-340-8648
TTY: 711

Blue Cross® and Blue Shield® of Minnesota and Blue Plus® are nonprofit independent licensees of the Blue Cross and Blue Shield Association.

BlueCross BlueShield BluePlus **Blue Advantage**

Name: **ROBERT TEST**

ID: **MQG8800000000**

Group Number	MNCAID01
Plan ID	MSCP0001
Medicaid ID	800000000

Svc Types	Med, Rx, Dental	Care Type	MN HLTH Care Program
Office Visit Copay	\$28	Dental Network	Minnesota Select Dental
ER Copay	\$100	Dental Copay	NONE
Non-ER Copay	\$100	RX Bin	610455
EyeGlasses Copay	\$10	RX PCN	MCAIDMN
Brand Name Copay	\$25		
Generic Copay	\$10		
Rx Network	C		

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MinnesotaCare – no copay and copay

BlueCross BlueShield BluePlus **MinnesotaCare**

Name: **ROBERT TEST**

ID: **MDQ8800000000**

Group Number	MNCAID01
Plan ID	MCAR0001
Medicaid ID	800000000

Svc Types	Med, Rx, Dental	Care Type	MN HLTH Care Program
Office Visit Copay	NONE	Dental Network	Minnesota Select Dental
ER Copay	NONE	Dental Copay	NONE
Non-ER Copay	NONE	RX Bin	610455
EyeGlasses Copay	NONE	RX PCN	MCAIDMN
Brand Name Copay	NONE		
Generic Copay	NONE		
Rx Network	C		

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BlueCross BlueShield BluePlus **MinnesotaCare**

Name: **ROBERT TEST**

ID: **MQG8800000000**

Group Number	MNCAID01
Plan ID	MCAR0001
Medicaid ID	800000000

Svc Types	Med, Rx, Dental	Care Type	MN HLTH Care Program
Office Visit Copay	\$28	Dental Network	Minnesota Select Dental
ER Copay	\$100	Dental Copay	NONE
Non-ER Copay	\$100	RX Bin	610455
EyeGlasses Copay	\$10	RX PCN	MCAIDMN
Brand Name Copay	\$25		
Generic Copay	\$10		
Rx Network	C		

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Minnesota Senior Health Options (MSHO)

		SecureBlue™ (HMO SNP) H2425001	
Name ROBERT TEST		Group Number MNCAID01	
ID MQS899999999		Plan ID MNCAR0001	
ID MQS899999999		Medicaid ID 99999999	
Svc Types Brand Name Copay Generic Copay Rx Network Dental Network		Care Type Rx Bin Rx PCN Rx ID Issuer	
Med, RX \$0 \$0 Standard MN Select		MN HLTH Care Prog 610455 SBPARTD 999999999 80840	
MEDICARE ADVANTAGE HMO		MedicareRx Prescription Drug Coverage	

		bluecrossmn.com/secureblue	
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DHS Appeals Unit, P.O. Box 64941 St. Paul, MN 55164-0941			
Providers: Submit claims to the local Blue Cross and/or Blue Shield plan.			
Blue Plus P.O. Box 982816 El Paso, TX 79998-2816			
Member Services: 1-888-740-6013		Behavioral Health: 1-888-275-3974	
Prescription Questions: 1-888-877-6424		Nurse Line: 1-888-275-3974	
DHS Ombudsperson: 1-651-431-2660		Provider Services: 1-866-518-8448	
Pharmacist Only: 1-800-648-2778		Delta Dental of MN: 1-800-774-9049	
Quitting Tobacco Program: 1-888-662-2583		Blue Ride: 1-866-340-8648	
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Reimbursement Policy Changes

Reimbursement Policy changes effective on January 1, 2024, were communicated in Provider Bulletin P80-23. For many covered services, Blue Cross has configured the claims processing system to be consistent with MHCP guidelines. Services following MHCP guidelines effective January 1, 2024, will not have a Reimbursement Policy published. Blue Cross will be following the MHCP guidelines for Anesthesia Services and therefore, a separate Reimbursement Policy will not be published.

Claim Submission

Blue Cross follows the requirements published in the AUC Best Practices titled Claim Service Dates Restricted to Same Calendar Months which can be located at: [Best Practice - Claim Service Dates Restricted to Same Calendar Month \(state.mn.us\)](https://www.state.mn.us/best-practice-claim-service-dates-restricted-to-same-calendar-month)

On a professional claim, service date spans should only be within the same calendar month. Multiple claims may be submitted for different dates within the same calendar month based on the provider's billing practices.

On an institutional outpatient claim, statement and service date spans should only be within the same calendar month. Observation, extended recovery, and emergency department services beginning before and completing after midnight are exceptions to this Best Practice if performed during the same visit. Procedures beginning on one day and ending on another should be billed together.

This best practice does not apply to an institutional inpatient claim.

Replacement and Cancel/Void Claims

Blue Cross follows the requirements as published in the AUC Best Practices titled Replacement/Void Claims which can be located at: [Best Practice - Replacement Void Claim \(state.mn.us\)](https://www.state.mn.us/best-practice-replacement-void-claim)

Products Impacted

- Families and Children
- MinnesotaCare (MNCare)
- Minnesota Senior Care Plus (MSC+)
- Minnesota Senior Health Options (MSHO)

Questions?

Please email Blue Cross at MHCPProviders@BlueCrossMN.com