PROVIDER QUICK POINTS PROVIDER INFORMATION



January 24, 2024

Blue Cross Blue Shield National Coordination of Care Overview

The Blue Cross Blue Shield (BCBS) National Coordination of Care program supports BCBS Medicare Advantage (MA) members. This program aims to increase the quality of care that members receive 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:

- Communicating information about open gaps in care to providers.
- Medical Records review to provide Blue Plans a complete understanding of their members' health status.

MA PPO members qualifying for this program can be identified by having an address in Minnesota and the following logo on their Blue Cross ID Card:



Providers are required to respond to Blue Cross requests to support risk adjustment, HEDIS and other government required activities within the requested timeframe. This may include medical records and additional documentation requests from Blue Cross related to this program.

Gap Closure Requests

Providers may receive an increase in Stars and Risk Adjustment gap closure requests from Blue Cross for members with identified gaps in care. This may result in increased contact with these members, through onsite visits or via phone outreach, resulting in greater continuity of 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). Providers will only receive requests from Blue Cross that are permissible under applicable law. 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, including Health Risk Assessments, physical measurements, depression screening, and advance care planning. AWVs increase access to preventive services, reduce healthcare costs, and increase provider revenue.

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Providers receive reporting from Blue Cross about members who have received an Annual Wellness Visit. Blue Cross also provides ongoing lists of members who have not received their annual wellness visit and ask that providers 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. Blue Cross requests that providers outreach to these members to schedule the services necessary to close the identified care gap.

Blue Cross provides detailed specifications for each measure which outlines the measure denominator/numerator and best practices for closure. Blue Cross encourages providers to access these resources on the 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 the provider network to ensure appropriate access to services that support 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 the 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.

Medicare Risk Adjustment

Blue Cross provides significant provider resources to our provider community, including Provider webinars, Microlearning and opportunities to earn CEU's and CME's. Information can be accessed on the Availity Learning Center, at: 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?

Please contact Provider Services at 651-662-5200 or 1-800-262-0820.