AAHAM
2026 Fall

BlueCross BlueShield
Nebraska

An independent licensee of the Blue Cross Blue Shield Association

Agenda

01 P3 and Medicare Advantage

02 CMS Rate Letters

03 Availity

04 Maternity Unbundling

05 Contacting BCBSNE

06 What’s Happening?

P3 Health and Medicare Advantage

TRANSITIONS TIMELINE

Preauthorizations	May 1, 2026
Preauth Appeals	Oct. 1, 2026
P3 Availity Provider Portal	Jan. 1, 2027
Claims Processing	Jan. 1, 2027

QUESTIONS? CONTACT P3 Health

UM: 531-242-5930
Appeals: 888-488-9850
Claims 1/1/27: 800-635-0579

UM: umanagement@p3hp.org

CMS Rate Letters

What critical access hospitals need to know

Who?
CAH providers

What?
CMS Rate Letter

When?
60 days from being released by MAC

How?
Submitted to BCBSNE via the PAI tool

Availity Provider Portal

What stays the same, what arrives at go live, and what comes next

WHAT STAYS THE SAME

- Eligibility and benefits
- Claim status
- Authorization resources
- Inquiries and communications
- Provider documents
- Multi-payer: registered users will add NE

NEW IN Q2 2027 (GO LIVE)

- Big win:
  - Submit claims
  - Submit attachments electronically (PDF)
- More claim status and denial detail
- More letters, better search
- Expanded secure messaging
- Direct links to auth portals

COMING NEXT

- Expanded appeal visibility
- Appeal documents and attachments
- Authorization workflow enhancements

Maternity unbundling changes the revenue cycle, not just the code set

Prepare now for a Jan. 1, 2027 shift from global maternity billing to service-level claims

TODAY

One global maternity payment

→ More claim lines
More decision points

2027

Prenatal visits, labor, delivery, and postpartum visits billed separately

REVENUE CYCLE IMPACT

Clean claims depend on clean transition logic

FOUR READINESS MOVES

1 Lock the transition playbook

- Define billing for pregnancies spanning 2026–2027
- Align payer-specific rules before claims hit

2 Rebuild charge capture

- Map prenatal, delivery and postpartum services
- Validate E&M, modifiers and preventive handling

3 Test the full claim path

- Run unit, regression and end-to-end scenarios
- Anticipate edits, duplicates, pends and appeals

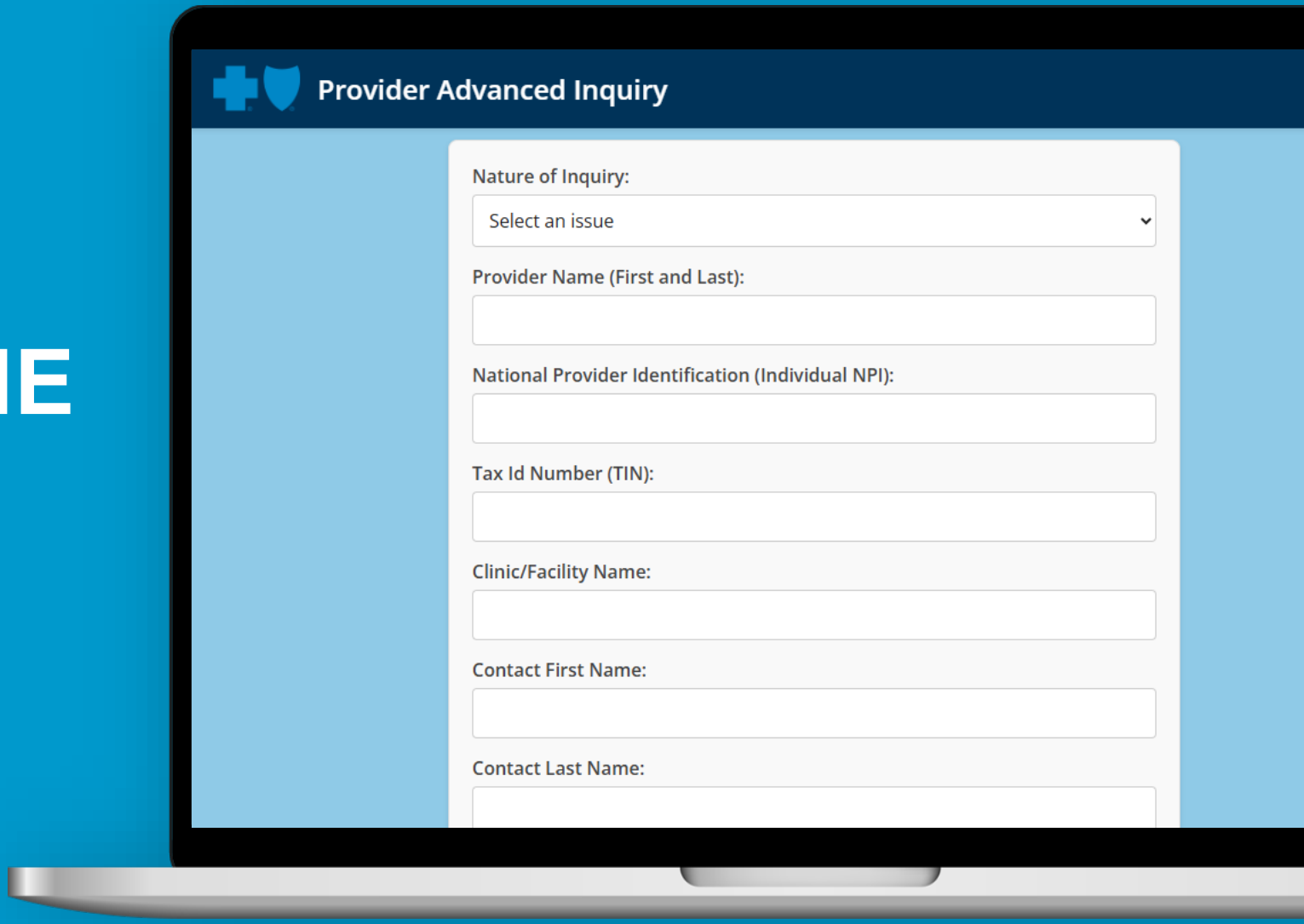
4 Watch the first signals

- Track denials, cash, visit patterns and outliers
- Create a fast feedback loop with payers and clinicians

THE LEADERSHIP ASK

BCBSNE is meeting with NMA, NHA, ACOG and other organizations across the state. As decisions and process changes occur, please ensure your teams stay current by visiting NebraskaBlue.com Alerts and Updates and reviewing our UPDATE newsletter.

Contacting BCBSNE



What's Happening?

Provider UPDATE Newsletter – Extension of your contract

October – December

Special edition MA-only newsletters, mid-month

Beginning in January

MA moves to a quarterly newsletter

UPDATE commercial newsletters

P&P updates, Commercial & FEP claim information, Clinical Authorization and Appeals updates, Payment Integrity notifications, dental updates and more

Policy to watch

The EMR Conversion Policy will be announced

Questions

THANK YOU FOR YOUR TIME

P3 Health Partners is an independent population health management company that provides Medicare Advantage support services to Blue Cross and Blue Shield of Nebraska, an independent licensee of the Blue Cross Blue Shield association.