

# Update



A bimonthly newsletter produced for healthcare professionals by the Health Network Management Services (HNS) Department at Blue Cross and Blue Shield of Nebraska (BCBSNE)

"Partnering with you for a healthier Nebraska"

The Update provider newsletter contains up-to-date information about BCBSNE. We deliver this material to health care professionals throughout Nebraska to continually improve our communication with those who contract with us.

If you are a BCBSNE Participating and/or BluePreferred health care professional, this newsletter serves as an amendment to your agreement with us. Therefore, it is your responsibility to comprehend and act upon all information that affects your contractual relationship with BCBSNE.

You are encouraged to file every issue of the Update within your BCBSNE Policies and Procedures manual.

Non-participating health care professionals receive the same information as a service to persons covered by BCBSNE.

The symbols below will point you toward articles of interest as well as key contacts and information.

## SYMBOL KEY

- target audience  • HCFA1500 billers  HCFA1500 • UB92 billers  UB92 • paper billers 
- electronic billers  • contact by mail  • contact by phone  • contact by e-mail 
- find it online  • clip it  • investigative 

## NE I.D.s Eliminate SSN

 healthcare provider community

As previously advised in the Anti-Social Alert article published in the Nov/Dec 2003 issue of UPDATE, all Blue Cross and Blue Shield (BCBS) Plans have been mandated by the BCBS Association to eliminate the use of Social Security numbers on I.D. cards by January 1, 2006. Several BCBS Plans have already begun to implement this mandate (either partially or in full) upon their renewal of I.D. cards nationwide.

**Beginning August 1, 2004**  
 BCBSNE will begin the process of replacing the subscriber Social Security number as the main component of the member I.D. number.

The new I.D. number will continue to begin with the existing alpha-prefix that is currently assigned; and will be followed by seven numeric positions, two alpha positions, and a member specific two-digit suffix e.g. YEP1234567AB01.

All new groups and plan participants enrolled August 1, 2004 and after will be issued I.D. cards with a non-Social Security based I.D. number. For existing BCBSNE members, the I.D. numbers will be converted at the time of membership renewal, when adding a new family member, or when a change in coverage or lost I.D. card requires a replacement card to be issued.

When your front desk or admitting office staff verifies the patient's insurance coverage, we recommend that they also verify the current I.D. number and obtain a copy of the I.D. card whenever possible.

Please direct questions about the I.D. number conversion to your Health Network Consultant.





## NASCO CHANGES

HCFA ~~1500~~ UB ~~92~~ business office/billing staff

As of 4/1/04 the NASCO system at BCBSNE has been discontinued. This system was used for processing KRO/KBS, AYA, LTI & ATT claims.

As of 1/1/04, BCBSNE was no longer the administrator of benefits for AYA, LTI or ATT. Claims for dates of service prior to 1/1/04 were processed via the NASCO system. A three-month runout was provided to accommodate the processing of any remaining claims or claim appeals.


 Now that NASCO is no longer available, any claim inquiries, appeals or general questions related to AYA, LTI, or ATT pertinent to dates of services prior to 1/1/04 should be directed to Horizon BCBS at 1-800-828-5894.


 Claims or appeals that have yet to be submitted for dates of services prior to 1/1/04 should be sent to:

Horizon BCBS  
Attn: Lori Daniels  
3 Penn Plaza East  
Newark, NJ 07105-2200

KRO/KBS began going through ITS for BlueCard as of 1/1/04. Any

claims with a date of services 1/1/04 and after are processed by BCBSNE through BlueCard. Dates of service prior to 1/1/04 were processed through the NASCO system.

 Claim appeals and/or inquiries for dates of services prior to 1/1/04 should be directed to AnthemBCBS at 1-800-258-0503.

 Claims or appeals with dates of service prior to 1/1/04 that have yet to be submitted should be sent to:

Anthem BCBS  
Attn: Michelle Robertson  
220 Virginia Avenue  
Indianapolis, IN 46204

## Mental Health Terminology

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When inquiring about benefits for mental health services provided in an office setting, please use the terminology "**Professional Office**" to describe the place of service rather than "Outpatient". Some contracts have benefits that differ depending on **where** the service is provided. To make sure you are given accurate benefit information, remember to use the correct terminology to describe the service.

## United Parcel Service (UPP) I.D. Numbers Change

HCFA ~~1500~~ UB ~~92~~ business office/billing staff

As of July 1, 2004, all United Parcel Service (UPS) member identification numbers will be changed to replace the previously used subscriber Social Security number. Following the alpha-prefix "**UPP**", the identification number will be a 9-position, numeric, randomly assigned number. There will be no alpha-characters embedded in the identification number.

It is imperative that the new identification number be used when filing claims with dates of service beginning July 1, 2004. Use the new identification number when verifying eligibility and benefits beginning July 1st.

If you are a Primary Care Physician (PCP) office, be sure to report the new identification number when issuing any referrals for UPS members beginning July 1, 2004. For existing active referrals, BCBSNE is mapping all old identification numbers to the new number which eliminates the need for you to issue a new referral to accommodate the change in your patient's I.D. number.

Another result of this change will be reflected on the July 2004 Member List for PCP offices which will list UPS members as 'current', 'terminated', and 'new' patients. The member identification number under current patient and new patient will be the new number that is effective July 1, 2004. The member number under terminated patient will be the previously used subscriber Social Security number that has been terminated June 30, 2004.

# Hospice/Respite and Home Health Claims Billing Refresher

**Note:** All of the following services require an authorization from the BCBSNE Case Management Department.

Hospice Outpatient	
<b>Bill Type</b>	82X
<b>Valid revenue Codes</b>	551, 552, 561, 571, 572, 652
<b>Revenue Codes 551, 561, and 571</b>	A date of service is required. 'Units' Form Locator must be completed. Units must be completed with a value of '1'.
<b>Revenue Codes 552 and 572</b>	A date of service is required. 'Units' Form Locator must be completed. Units equal to hours.
<b>Revenue Code 652 (Crisis Care in the home )</b>	Summarize all charges for nursing and aid services provided in each 24 hour period calculated as midnight to midnight. 'Units' Form Locator must be completed with a value of '1'.
<b>Supplies</b>	Must be billed separately on a HCFA 1500 under an HME provider number.
Inpatient Hospice/Respite Claims	
<b>Bill Type</b>	82X
<b>Valid revenue Codes</b>	652, 655 or 656 When Revenue Codes 652, 655 or 656 are present, no other Revenue Codes are allowed because these are considered all-inclusive daily revenue codes.
<b>Revenue Code 652 (Inpatient Crisis Care)</b>	Summarize all charges for room and ancillary service charges for Inpatient Crisis Care. 'Units' Form Locator must be completed. Units equal to covered days.
<b>Revenue Code 655 (Inpatient Respite Care)</b>	Summarize all room and ancillary service charges for inpatient Respite Care. 'Units' Form Locator must be completed. Units equal to covered days.
<b>Revenue Code 656 (Inpatient Hospice Care)</b>	Summarize all room and ancillary service charges for inpatient Hospice Care. 'Units' Form Locator must be completed. Units equal to covered days.
Home Health Services	
<b>Bill Type</b>	33X
<b>Valid revenue Codes</b>	421,431, 441, 551, 552, 571 or 572
<b>Revenue Code 421, 431, and 441</b>	CPT/HCPCS codes are required for each service billed.
<b>Revenue Codes 421, 431, 441, 551 and 571</b>	Date of service is required. 'Units' Form Locator must be completed. Units equal to '1'.
<b>Revenue Code 552 and 572</b>	Date of service is required. 'Units' Form Locator must be completed. United equal to hours.
<b>Supplies</b>	Must be billed separately on a HCFA1500 under an HME provider number.



# COX-2 Preauthorization Program

 Healthcare provider community

The Educators Health Association (EHA) and Nebraska Association of County Officials (NACO) Employee Groups will be implementing **COX-2 Preauthorization (PA) Program**. NACO will begin its program on July 1, 2004, whereas, EHA implementation takes effect on September 1, 2004.


Preauthorization programs typically target drugs that may be

unnecessary and costly for the vast majority of patients.

Preauthorization of drugs is a tool that helps ensure patient safety while managing the cost of COX-2 drugs such as Celebrex, Vioxx, and Bextra.

BCBSNE uses a clinical team of physicians and pharmacists to identify those medications appropriate for preauthorization programs. Patients' medical and pharmacy claims are reviewed for evidence of high-risk for GI bleeding. Additionally, physicians may submit a PA form for patients who may be at high-risk.

Expect to see more information about the Preauthorization Program in the August issue of the Update.

 Criteria that are used for the **Cox-2 Preauthorization Program**, as well as further instructions on our provider website:

[www.bcbsneprovider.com](http://www.bcbsneprovider.com)

## 76514 PACHYMETRY

*CORNEAL PACHYMETRY, UNILATERAL OR BILATERAL  
(DETERMINATION OF CORNEAL THICKNESS)*

**UB92** business office/billing staff

### **Does BCBSNE pay for Pachymetry?**

No. This code will be denied as content to the office visit

### **Why does BCBSNE consider it to be content to the office visit?**

When the CPT Editorial Panel voted on the code change, it was stated that the code would have no physician work component. The specialty society stated that the test takes very little time to perform

and should be performed only once in a lifetime.

These industry considerations were included in the decision not to allow separate reimbursement for this code.

### **If we choose to bill it, how should it be billed?**

If done bilaterally, bill it unmodified.

If done unilaterally, reduce your charge and bill the 76514 with a modifier -52.

The 'Unit' value is always '1'.

# BlueCard Program-Three Easy Steps

HCFA 1500 UB92 business office/billing staff

There are just three steps to filing claims for out-of-area patients with Blue Cross and/or Blue Shield health coverage:

1. With the member's I.D. card in hand, call BlueCard Eligibility at ☎ 1-800-676-BLUE (2583).
2. Tell the operator the first three characters of the member's I.D. number and you will be transferred to the 'home' plan to verify eligibility.

3. After the patient has received care, submit the patient's claim to BCBSNE.

Please remember: do not request complete payment up front.

☎ To check claim status for BlueCard claims, please contact BCBSNE's GABBI (voice response line) at 1-800-635-0579



## Department Of Corrections

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BCBSNE was awarded the contract for inmate healthcare bill-processing effective April 1, 2004. The contract with the Department of Corrections is for bill processing using the BCBSNE existing network of PPO providers.

Questions that may arise about this new arrangement:

### Q. What services are included?

- A. All health care services provided outside of a DCS (Department of Correctional Services) facility will be covered with the following exclusions:
- Tecumseh State Correctional Institution (TSCI) inmates,
  - safekeepers,
  - interstate transfers and
  - detainees at Hastings Correctional Center, all of which are not covered by the contract.

### Q. How does a healthcare provider know who to bill BCBSNE or DCS?

- A. A DCS form has been developed that will be provided to the healthcare provider for each appointment/visit. The form will clearly state who is to be billed.

### Q. What identification number is used to bill BCBSNE?

- A. The number will be on the DCS form that the escort will give to the health care provider at EACH visit. **The inmate I.D. number must be a total of nine**

**(9) digits. Three leading 8's are listed on the form. If the inmate's I.D. number is four or five digits, then leading 0's will be entered to make it a nine digit number. Example: 888061234 or 888002345.**

### Q. Will these identification numbers have an alpha prefix?

- A. These numbers will not have an alpha prefix (just the 888 prefix).

### Q. Since these identification numbers do not have an alpha prefix, do we have to send them paper?

- A. No, these claims can be sent electronically.

### Q. Does a healthcare provider benefit from this contractual arrangement?

- A. Yes. Quick turn-around time for claim processing means BCBSNE often pays claims within a few days while the State can take up to 45 days to process payments.

If you have other questions regarding this contract, please contact your Health Network Consultant.

## VISUAL FIELD EXAMS 92081-92083

HCFA 1500 business office/billing staff

- If done bilaterally, bill the code unmodified.
- If done unilaterally, reduce your charge and bill the code with a modifier -52.
- The 'Unit' value is always '1'.

## Return Claim Letter Change

You will notice a change in our return claim letters. In addition to the standard reference information at the top of the letter we have added your patient account number and the total amount of charges for that claim. We will no longer attach the actual copy of your claim with the letter.

Please continue to provide us with the requested information needed to process your claim as instructed on the letter.

## Some J codes need NDC

HCFA 1500 business office/billing staff

National Drug Code (NDC) numbers are required when billing for non-drug specific J Codes i.e. J3490, J3590, J7599, J7699, J7799, J8499, J8999, J9999 or any other non-drug specific J Code. NDC numbers can be found on the package or wrapping of the medication.


NDCs are not required when billing for drug specific J Codes.



## BONE MORPHOGENIC PROTEIN

UB 92 business office/billing staff

The InFUSE Bone Graft is scientifically validated for lumbar spinal fusion procedures when used with an FDA approved fusion cage or a threaded bone dowel allograft or a whole or partial femoral ring allograft.

 All other uses of bone morphogenic protein (BMP) are considered to be investigational and therefore non-covered. Facilities should advise staff physicians about this policy.

## CPT 99000 no longer reimbursed for HMO/POS

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Effective for dates of service July 1, 2004 and after, "handling and/or conveyance of specimen for transfer from the physician's office to a laboratory" (CPT 99000) will be considered as included within the charge for a total service payable (content of service) for the HMO/POS lines of business. As a reminder, charges denied as content of service are not billable to the patient.

Implementation of this policy change will result in conformity for all products written and/or administered by BCBSNE.

# Some Groups Offer Routine Vision Benefits

HCFA 1500 business office/billing staff

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The list below identifies groups that carry some type of routine vision benefits.

If you file a claim to BCBSNE for a patient covered by one of these groups, you are not required to offer a discount through the Vision Discount Program for that particular service. Call a Provider Service representative at 1-800-642-8516 for information regarding specific routine covered services.

The information listed in this article is subject to change and applies to our benefits as of May 2004.

## Groups with routine vision benefits

Account Recovery, Inc.	Metalogic, Inc.
Affiliated Foods	Metropolitan Utilities District
Alltel Corporation	NC+ Hybrids Cooperative, Inc.
BYCO	Nebraska Machinery Company
CAMACO	Nebraska Masonic Home
Carlson Systems, Inc.	Nebraska Medical Association
Centris Federal Credit Union	Nebraska Press Association
City of Fairbury	Nebraska Public Power District
City of Falls City	Nucor Steel & Vulcraft Divisions
Commercial Federal Bank	Optimum Card Services
Community Health Endowment of Lincoln	Pc & Sons Construction
Community Hospital Inc., Falls City	Phoenix Casting & Machining, Inc.
ConAgra Foods	ProData Computer Services, Inc.
ConAgra Foods, Inc., DbA Monfort	Rehab Visions, Inc.
Dicobe Tapes Inc.	Rhoten Wholesale Meat Co.
Drs. Gross, Iwersen et al.	Richmond Engineering Corp.
EFG, Inc.	Shamrock Concrete Co.
Envelopes Plus	Sonntag Goodwin & Quandt, P.C.
Father Flanagan's Boys Home	South Pacific Inc.
Foundation For Educational Funding	Stalder Cattle Co.
Gordmans, Inc.	Swift & Company
Haiar & Schwery Inc.	Tabitha Health Care Services, Inc.
Huebner Supply Company, Inc.	The Buckle, Inc.
Judah Caster Company	The Eating Establishment, Gering
Jun Kaneko Studio	Thomas Funeral Home
Lonnie Mercier, M.D., P.C.	Village of Boystown
Lozier Corporation	Village of Davenport
Lutz & Company	Volz, Inc.
Malashocks Jewelers Inc.	Wick's Truck Trailers, Inc.
Medaccounts Corporation	Z & S Architectural Woodworking
Mellen & Associates, Inc.	



# BlueCross BlueShield of Nebraska

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If you'd like to receive an e-mail each time we post a new issue of this newsletter on the provider website, please go to: [www.bcbsne.com/update](http://www.bcbsne.com/update) and fill out the form provided. You'll also receive news about special announcements such as workshops, online resources, and other information from BCBSNE's Health Network Management Services Department!

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