

update

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



Partnering with you for a healthier Nebraska

www.bcbsneprovider.com

The *update* provider newsletter contains up-to-date information about Blue Cross and Blue Shield of Nebraska (BCBSNE) for healthcare professionals throughout Nebraska to continually communicate with those who contract with us.

If you are a BCBSNE Participating and/or BluePreferred healthcare 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 healthcare professionals receive the same information as a service to persons covered by BCBSNE.

We also publish each issue online at:

www.bcbsne.com/update

For permission to reprint material published in the *update*, e-mail the editor Marian Gramlich at:

marian.gramlich@bcbsne.com

Patient's and Member's Name Don't Match

Nicknames are great, except when filing claims. You may know your patients by their initials or nicknames, but unless that is how their membership is listed within the BCBSNE systems it can be impossible to match the claim to the member. Birthdates are helpful when matching the file to the claim, but it takes time and does not always end up with the exact match.

We strongly recommend that you **obtain a copy of the member's ID card at the time of the visit to ensure you will be reporting the most current ID** number when filing your claims and when verifying eligibility, benefits, or claim status.

All Blue Cross and Blue Shield Plans were mandated by the Blue Cross Blue Shield Association to **eliminate the use of social security numbers on ID cards by January 1, 2006**. Blue Cross and Blue Shield of Nebraska (BCBSNE) began this process in August 2004. All new members are being assigned a non-SSN ID number. Existing members will be converted to a new ID number at the time of membership renewal, when adding a new family member, in the event of a coverage change, or when receiving a replacement card for one that had been lost or stolen.

The **new ID numbers that are being issued to BCBSNE members will continue to begin with the existing alpha prefix that was previously assigned**; but instead of the SSN number, the **alpha-prefix will be followed by seven numeric positions, two alpha positions, and a member specific two-digit suffix (e.g. YEP1234567AB-01, -02, -03)**.

The quickest way to verify eligibility, benefits and claim status for your

Please see Don't Match on page 4.

The Blue Board

Bill for One Exam Only

Please do not bill for two exams on the same date of service. Many claims are being filed for a routine exam and a periodontal examination. If doing a routine exam and a periodontal examination, please submit the claim using the bill code D0180. This will reduce the time used to review your claims. [HNS](#)

Resin-Based Composite Restorations

Each composite restoration CDT-4 code identifies not only the number of surfaces but also if that particular code should be used for posterior or anterior teeth. The nomenclature for these codes can be found on page 33 of the CDT-4 book. [HNS](#)

NPI ALERT

The HIPAA Administrative Simplification Standard for National Provider Identifier (NPI) for Health Care Providers was published in the Federal Register on January 23, 2004.

Health Care Providers can begin applying for NPI's beginning on, but no earlier than, May 23, 2005, with a federally mandated implementation date of May 23, 2007.

Watch your future *update* newsletters for more information! [HNS](#)

Dental Code D4381

When submitting CDT-4 code D4381; "Localized delivery of chemotherapeutic agents via a controlled release vehicle into diseased crevicular tissue, per tooth, by report" please give the tooth number(s). This code should be submitted once per tooth, submitting with multiple surfaces would not be appropriate. [HNS](#)

Electronic & Paper Claim Submissions:

If your office uses a clearinghouse for your claim submissions and x-rays need to be sent, please do not submit the claim data through both electronically and paper. In most circumstances the electronic claim will process first and the paper claim will be denied as a duplicate resulting in a delay as well as additional cost for your office and BCBSNE. [HNS](#)

No X-rays Needed

FEP does not need X-rays for dental claims except in rare situations. When these rare situations occur, BCBSNE will request the X-rays. By not submitting X-rays, you will be saving money and time! [HNS](#)

Pre-Printed Dental Claim Forms

Effective 1-1-05 BCBSNE will no longer supply pre-printed dental claim forms. [HNS](#)

Submit Pre-Treatment as Separate Claim

Please submit pre-treatments as a separate claim from the claims for charges when the services have been provided. This will assist us in providing good turnaround time for your office. [HNS](#)

CDT-5 is coming

New codes are effective January 1, 2005. Please purchase your new CDT-5 manual from the ADA now and be HIPAA compliant! [HNS](#)



Timely Filing Restrictions for BCBSNE and BlueCard

Program Members

Effective January 1, 2005, BCBSNE will implement the following time limit for filing or adjusting a post-service claim. All claims and any revisions or adjustments must be submitted by the Provider or Covered Person within the time filing limit set forth in the Master Group Application. BCBSNE Master Group Applications have time filing limitations ranging from 12 months to 18 months from the date of service. Beginning January 1, 2005, all new claims, revisions, or adjustments that are not filed by a BluePreferred or BlueClassic Provider prior to the claim filing limit stipulated in the Master Group Application will be the provider's liability.

This time limit applies to all BCBSNE lines of business including the BlueCard Program.

When verifying benefits for any BCBSNE member, we recommend verifying time filing limitations stipulated in the Master Group Application (which is also known as the group or member contract). [HNS](#)



Timely Filing Limitations for FEP Members

The FEP brochure stipulates the following language: Send us your claim and appropriate documentation as soon as possible. The claim must be submitted by December 31 of the year after the service was provided. If timely filing was prevented by administrative operations of Government or legal incapacity, claims must be submitted as soon as reasonably possible. If FEP returns a claim or part of a claim for additional information, the claim must be resubmitted within 90 days, or before the time filing period expires, whichever is later. [HNS](#)



800-821-4787 Streamlined

On September 1, Health Network Services' 800# call line was upgraded to serve you better. Now it is easier to contact the individual you need. Select from four options to reach the Health Network Consultant group, Provider File Maintenance staff members or Lynn Stivers, Provider Education Specialist or the EDI Communications Administrator, or to listen to Workshop Information.

A new feature is the ability for you to press the "zero" to return to the main menu. As before, if you do not make a selection, the message will repeat once and then automatically transfer to the Provider File Maintenance staff.

For your convenience, the organization of the 800# is below. ✂

Option One, Health Network Consultants:

- For Western Nebraska, press ONE for Charlie Kennedy
- For Central Nebraska, press TWO for Patrick Maginnis
- For Lincoln, Nebraska, press THREE for Cindy Rutledge
- For Eastern Nebraska, press FOUR for Sue McHargue
- For Omaha, Nebraska, press SEVEN for Vickie Richter or press EIGHT for Pam Black.

Option Two, Provider File Maintenance staff or Lynn Stivers:

- For Fauziah, press ONE
- For Jill, press TWO
- For Kurt, press THREE
- For Staci, press FOUR
- For Lynn Stivers, press FIVE
- For Tamara, press SIX

Option Three, Provider Education Specialist or EDI Communications Administrator:

- Provider Education Specialist, press ONE
- EDI Communications Administrator, press TWO

Option Four, Health Network Services Workshop Information

Listen to information about upcoming workshops and leave us a message if you would like to register or if you have a question.

New Claims Submitted Incorrectly

Please use the Reconsideration Form when filing a claim to be reviewed for adjustment or correction after the original processing. Claims will be delayed if submitted with handwritten "Correction," "Re-process," or "Re-file." The Reconsideration Form was developed to assist both your office and BCBSNE.

The Reconsideration Request Form should be attached to the front of your amended claim, which has been filled out completely and legibly.

In the section titled, "Reconsideration" (Column B), mark the box that clearly identifies the change needed that was made on the original claim, i.e., incorrect CDT code. By attaching a Reconsideration Request Form, the corrected claim should not be denied as a duplicate claim submission. [HNS](#)

The Reconsideration Request Form is available on the provider website:

www.bcbsneprovider.com

If you do not have internet access, the Reconsideration Request Form is available by calling Provider Service at

(402) 390-1890
or
1-800-642-8516

Dental Code Insert

Please see the four-page insert describing the FEP dental benefits for 2005. This insert depicts the codes that are covered for FEP members with Standard and Basic coverage. By utilizing this insert, your office does not need to contact Provider Service to verify coverage.

If you have any questions, please contact your consultant. [HNS](#)

Don't Match from cover

BCBSNE patient is to call our voice response unit, Greater Access to Blue Cross and Blue Shield of Nebraska Information (GABBI). **GABBI has been enhanced to accommodate the new BCBSNE ID numbers.** While our highly-trained Provider Services reps can easily distinguish an alpha character from a numeric one, GABBI will require a little prompting from you.

When entering an alphabetic character, press the asterisk followed by the key that the character is on. Then press either the one, two, or three key based on the position of the letter on the key. For example, for the letter 'Y', you would press '*', '9', then '3'. If 'Q' appears in the member's ID, press '*', '1', '1'. If 'Z' appears, press '*', '1', '2'.

Call GABBI at 1-800-635-0579. [HNS](#)

New Look for *update* ... from the new editor



As the new Provider Education Specialist for the Health Network Management Services and Editor of *update*, I am following in the footsteps of some exceptional people!

While I am new to BCBSNE, I have worked for a variety of Omaha businesses in marketing/public relations. The welcome I received and the positive attitude I have observed of my new colleagues to customers and other employees is second to none! To be consistent with our image on our website, www.bcbsneprovider.com, the image of *update* has been changed. One of changes is our cornerstone web graphic that will be featured in the banner. Other changes include more use of photography/

graphics and the Bulletin Board was renamed the Blue Board. The Blue Board will continue to be published on page two. New features include the NPI ALERT, which will appear near or within the Blue Board. *update* newsletters specific to dental issues will be noted. Eventually all archived articles will be reformatted so you may download them individually and not have to print the entire page.

Now it is your turn to respond. What do you think of the new format? You are the audience and I want to please you. Similar to a performer, I need your feedback whether it is applause, a standing ovation, or throwing tomatoes (softer than other fruits). Joking aside, please use your computer and e-mail me your thoughts.

Thank you for your time and please send your thoughts to marian.gramlich@bcbsne.com. [HNS](#)

Familiar BCBSNE Faces Now Part of HNS Staff



Jean O'Brien
EDI Communications
Administrator



Sean Blair
EDI Account Manager
and assists healthcare
providers with electronic
claims submission

Charlie Kennedy Health
Network Consultant for
Western Nebraska
healthcare providers



Staci Yochum
Provider Relations
Analyst



Pam Black
Health Network
Consultant for Omaha
healthcare providers



Kurt Fricke
Provider File
Administrator

Implant Abutment Placement

Does your office place an abutment along with a crown, bridge or denture for patients that have had an implant inserted? Any confusion on which codes should be submitted for these services?

Please see the nomenclature of code D6020 for the placement of the abutment, code D6056 or D6057 for the abutment. The codes D6058 through D6067 are for crowns. When placing a bridge please use codes D6068 through D6077. Placing a denture on an implant abutment should be identified with code D6078 or D6079.

Depending on the services performed, up to 3 line items may be submitted to identify the placement, abutment and crown/bridge/denture. Here is an example:

- D6020 Abutment Placement
- D6057 Custom Abutment
- D6063 Abutment Supported Cast Metal Crown

HNS

Submit Legible Claims

Please submit each claim with the person processing the claim in mind. If claims are typed in small letters (smaller than 8 point) or are hand-written, they can be very difficult or impossible to read. BCBSNE uses optical scanning equipment when paper claims have been submitted. This equipment will "read" the printed claim form and places that data into the claim adjudication system, thereby eliminating possible keying errors. When font size is too small or too light the claim data can not be "read" properly resulting in a delay in claim processing.

Even after reviewing the original document claims may still be difficult to understand what the claim is. This translates into a slower response, which may leave your dentist and patient feeling unhappy.

Our goal is to serve you the best we can and legible claims can help process claims faster and more accurately. [HNS](#)



BlueCross BlueShield of Nebraska

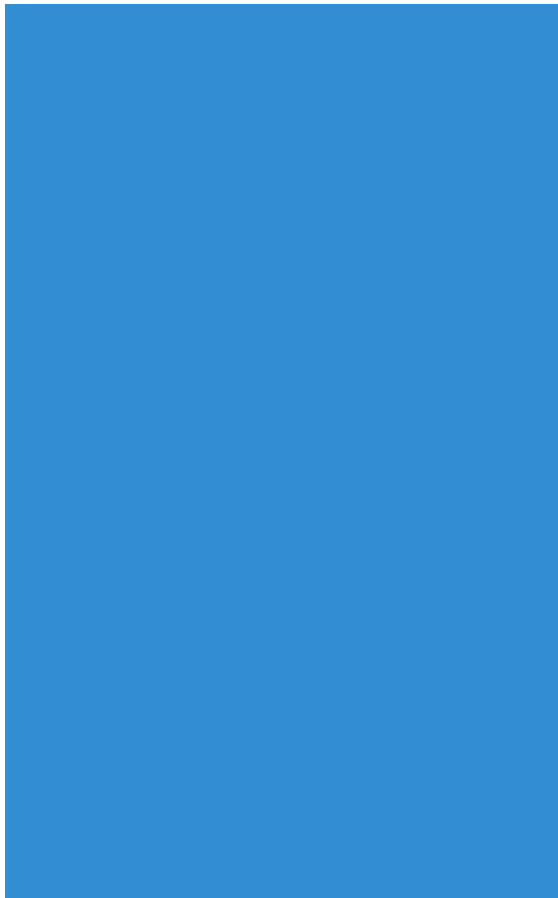
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If you'd like to receive an e-mail each time we post a new issue of this newsletter on the provider website, please go to: www.bcbsne.com/update and fill out the form provided. You'll also receive news about special announcements such as workshops,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



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