

# 2023 Blue's Tour

August 2023

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01

# Institutional Relations Staff

# New Staff



Job Title	Name	Contact Information
<i>Leadership</i>		
Director, Institutional Relations	<b>Janne Robinson, BSN RN</b>	785-291-8227 <a href="mailto:Janne.Robinson@bcbsks.com">Janne.Robinson@bcbsks.com</a>
Manager, Institutional Relations	<b>Lindsey Younger</b>	785-291-8129 <a href="mailto:Lindsey.Younger@bcbsks.com">Lindsey.Younger@bcbsks.com</a>
<i>Provider Consultants</i>		
Provider Consultant, Northern KS Hospitals	<b>Jessica Moore</b>	785-291-8862 <a href="mailto:Jessica.Moore@bcbsks.com">Jessica.Moore@bcbsks.com</a>
Provider Consultant, Southern KS Hospitals	<b>Karlene Clarke</b>	316-269-1602 <a href="mailto:Karlene.Clarke@bcbsks.com">Karlene.Clarke@bcbsks.com</a>
Contract & Specialty Provider Consultant	<b>Beth Downie, CPC</b>	785-291-8813 <a href="mailto:Beth.Downie@bcbsks.com">Beth.Downie@bcbsks.com</a>
Education Consultant	<b>Amanda Mellies</b>	785-291-7236 <a href="mailto:Amanda.Mellies@bcbsks.com">Amanda.Mellies@bcbsks.com</a>
Claims Research Analyst	<b>Kelly Burghart, CPC</b>	785-291-8849 <a href="mailto:Kelly.Burghart@bcbsks.com">Kelly.Burghart@bcbsks.com</a>
Provider Program Specialist QBRP/Blue Distinction	<b>Melanie Moriarty</b>	785-291-6593 <a href="mailto:Melanie.Moriarty@bcbsks.com">Melanie.Moriarty@bcbsks.com</a>
<i>Support Staff</i>		
Administrative Coordinator Topeka	<b>Kristen Best</b>	785-291-7213 <a href="mailto:Kristen.Best@bcbsks.com">Kristen.Best@bcbsks.com</a>
Administrative Assistant Topeka	<b>Veronica Power</b>	785-291-7838 <a href="mailto:Veronica.Power@bcbsks.com">Veronica.Power@bcbsks.com</a>
Institutional Relations Support Topeka	<b>Sadie Maxwell</b>	785-291-8830 <a href="mailto:Sadie.Maxwell@bcbsks.com">Sadie.Maxwell@bcbsks.com</a>
Administrative Assistant Wichita	<b>Cheryl Hall</b>	316-269-1609 <a href="mailto:Cheryl.Hall@bcbsks.com">Cheryl.Hall@bcbsks.com</a>
<i>Fax Numbers</i>		
Topeka Office- 785-290-0734 Wichita Office- 785-290-0702		
<i>ICD-10 Systems &amp; Hospital Audit</i>		
Administrator	<b>Rhonda Knoernschild, MSN, RN, CCM, CPC</b>	785-291-7497 <a href="mailto:Rhonda.Knoernschild@bcbsks.com">Rhonda.Knoernschild@bcbsks.com</a>
ICD-10 Coding Specialist	<b>Robyn Salazar, CCA, CPC</b>	785-291-7244 <a href="mailto:Robyn.Salazar@bcbsks.com">Robyn.Salazar@bcbsks.com</a>
Administrative Assistant	<b>Brenda Kelly</b>	785-291-7291 <a href="mailto:Brenda.Kelly@bcbsks.com">Brenda.Kelly@bcbsks.com</a>

- Karlene Clarke – Provider Consultant
- Kelly Burghart – Claims Research Analyst
- Sadie Maxwell – Institutional Relations Support





02

# Institutional Provider e-News Sign-up



# Institutional Provider e-News Sign-up

- Most of the provider information sent from Blue Cross and Blue Shield of Kansas (BCBSKS) to Institutional Providers is through email notifications, known as e-News.
- Go to [www.bcbsks.com](http://www.bcbsks.com) > Providers Home >> Institutional Provider >> e-News
- Provide your name, Title, Facility/Organization, City, State, & Email

<https://www.bcbsks.com/providers/institutional/e-news>



03

# BlueAccess Reminders

# BlueAccess - Reminders

## Room Rate Registration Form

- Submit this form at least annually and when rates change.
  - New room rates will be effective the 1st of the month following the acceptance of your room rate change form.
- BlueAccess > Resources > Forms, Publications and Procedures > Room Rate Registration Form
- Information needed to complete the form
    - Name(of person registering rates), title, Contact Email, Contact Phone Number
    - Hospital Name, Hospital Address, BCBSKS Provider #, Medicare Provider #
    - Room Rate Effective Date
    - Identification if the facility is a private bed only facility
    - Enter acute care bed rate for either semi-private and/or private



# BlueAccess - Reminders

## Provider Information Form

- Requirements
  - Submitted at least every 90 days
  - Completed for every NPI
  - Required regardless of whether there are changes
- Failure to attest as required by the Consolidated Appropriations Act (CAA) will remove your facility from the BCBSKS provider directory. Facilities that are not compliant will be suppressed beginning June 2, 2022.
- BlueAccess > Provider Information > Provider Information Form
  - Includes the contact information of key people within your organization Administrator, CEO, CFO, Quality Director, Business Office Manager
  - Includes the address information for that NPI for the correspondence, payment, remittance, physical location
  - Includes the person authorizing the submission/changes with contact name, email, phone and additional comments



# BlueAccess - Reminders

## BAA (Business Associates Agreement)

- Submit this form for anyone that would contact BCBSKS for HIPAA
- BlueAccess > Provider Information > Business Arrangements
- Information needed to complete the form
  - Legal Name (what's reported to IRS)
  - Tax ID
  - Doing Business As Name (if applicable)
  - Address
  - Contact Name, Phone Number & Email Address



04

# Provider Certifications



# Provider Certifications

- Cardiac Rehabilitation
  - Diabetic Education
  - Lactation Services
  - Pulmonary Rehabilitation
- 
- Program approval from BCBSKS is required to provide these services.
  - See the Institutional Provider Manual for specific program details.
    - BlueAccess > Resources > Forms, Publications and Procedures > Institutional Provider Manual
  - If you have questions regarding Provider Certifications, please contact Amanda Mellies 785-291-7236 or [amanda.mellies@bcbsks.com](mailto:amanda.mellies@bcbsks.com)



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# Pre-Service Reviews



# Types of Pre-Service Reviews

Prior Authorization

Predetermination

Precertification

# Pre-Service Reviews

- Roughly 75% of all pre-service review requests BCBSKS received last year were submitted by providers voluntarily. BCBSKS offers pre-determinations as a courtesy to providers – it is not required.
- BCBSKS Requires Pre-Service Review For The Following Services:
  - In-patient medical stays
  - In-patient mental health stays
  - Home health and hospice services
  - Transplants with the exception of cornea and kidney
  - Human Growth Hormone
  - Germline genetic testing
  - Certain prescription drugs

*Note: Some self-funded employer groups may have specific items that require prior authorization. These services are at the discretion of the employer -- not BCBSKS.*

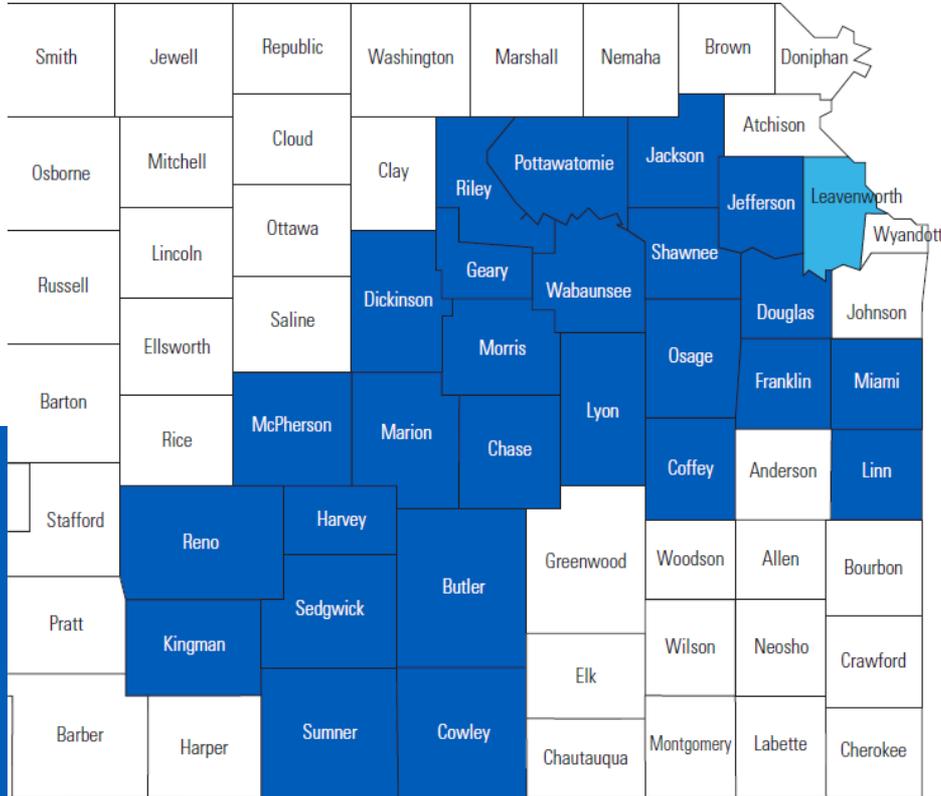
- Utilization review laws are already on the books in Kansas and include many of the same requirements outlined in recent prior authorization reform proposals.



06

# Medicare Advantage (MA)

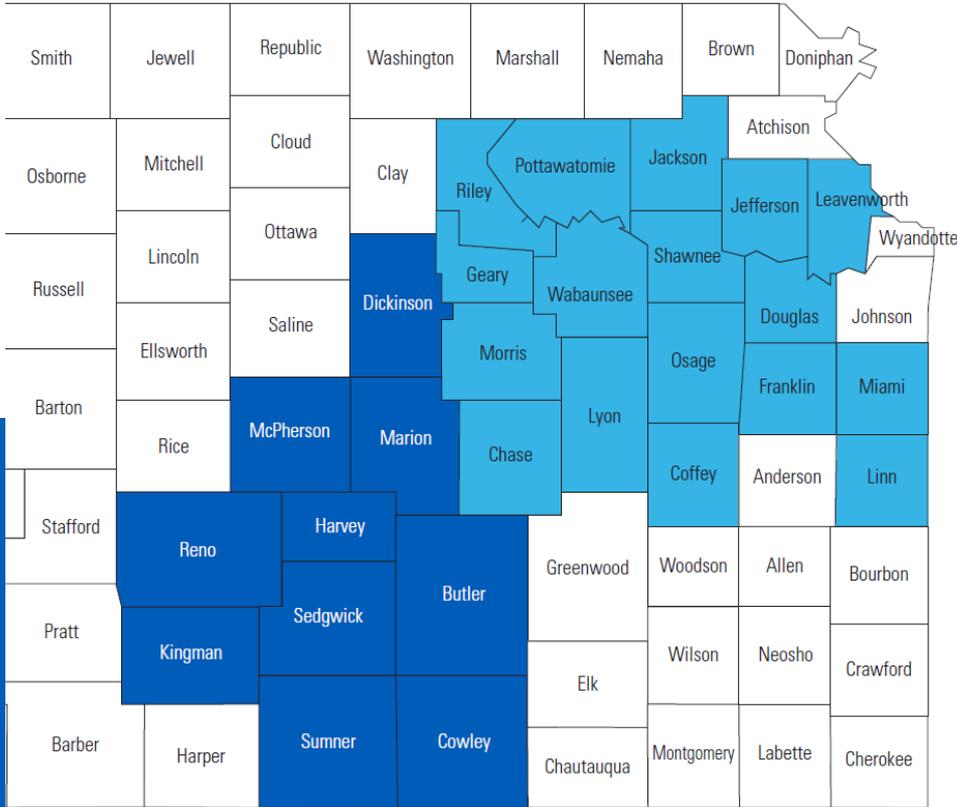
# Medicare Advantage Expansion



Leavenworth County

-  New counties
-  Old counties

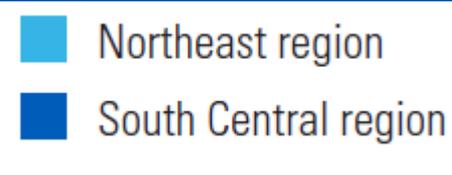
# Medicare Advantage Updates



Operating in 27 counties

Total enrollment is about 3,823

Star Rating: 3.5





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# MA Reminders



# MA Reminders

## CMS Rate Letters

- Send to [marateletters@bcbsks.com](mailto:marateletters@bcbsks.com)
- Takes 30 days to update

## Resources

- BCBSKS Webpage
  - MA Provider Manual
  - Benefit Summaries
  - Admission Guidelines

## Claim Submission

- Submit electronically to BCBSKS
- Paper claims
  - Prefix M3A:Mail to BCBSKS
  - All other prefixes Mail to PO Box 261323 Plano TX 75026-1323

## Appeal Submission

- Kansas Mail to PO Box 260875 Plano TX 75026-0875
- Out of state Mail to BCBSKS



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# Post Pandemic Changes



# Post Pandemic Changes

- Temporary Cost Relief
- Telehealth
- Emergency Issued Codes Termed



09

# 2024 QBRP Changes

# CAH QBRP Changes

- Antimicrobial Stewardship incentive percentage increased from 0.50% to 1.00%
- Hand Hygiene incentive percentage increased from 0.50% to 1.00%
- Unplanned All-Cause Readmissions incentive percentage increased from 0.50% to 1.00%
- Healthcare Associated Infections incentive percentage increased from 0.50% to 1.00%
- Planning Checklist incentive percentage increased from 0.50% to 1.00%
- Discharge Checklist incentive percentage increased from 0.50% to 1.00%
- Shift Change Huddles/Bedside Reporting incentive percentage increased from 0.50% to 1.00%
- Patient Family Engagement Leader incentive percentage increased from 0.50% to 1.00%
- Patient Family Engagement Committee incentive percentage increased from 0.50% to 1.00%
- Added incentive for Sole Community Hospital Status (incentive percentage of 8.00%)
- Added incentive for Blue Distinction Center designation (incentive percentage of 1.00%)
- Added incentive for Blue Distinction Centers Plus designation (incentive percentage of 2.00%)
- Added incentive for CMS STAR rating of 3 (incentive percentage of 0.50%)
- Added incentive for CMS STAR rating of 4 (incentive percentage of 1.00%)
- Added incentive for CMS STAR rating of 5 (incentive percentage of 2.00%)
- Added incentive for Medicare Low Volume status (incentive percentage of 5.00%)
- Streamlined verbiage for HL7/CCD incentives (no effect to percentage amounts)

# CAH QBRP Reporting Dates

## 2024 CAH Quality Based Reimbursement Program

### Reporting Periods

- Period 1 is due by November 5, 2023
- Period 2 is due by May 5, 2024

### Low Volume Incentive

- You must submit your most current cost report (S-3 worksheet) for both periods even if it does not change!
- The number entered on your attestation form is taken from line 1, column 8 of the S-3 worksheet.
- Qualifying events must be from 5/1/23 to 10/31/23 for Period 1 and 11/1/23 to 4/30/24 for Period 2.

### Data Submissions

- Period 1 data is gathered from discharges between 1/1/2023 to 6/30/2023
- Period 2 data is gathered from discharges between 7/1/2023 to 12/31/2023

### Effective Dates

- Period 1 incentives will be effective January 1, 2024
- Period 2 incentives will be effective July 1, 2024

# PPS QBRP Changes

- Added incentive for Sole Community Hospital Status (incentive percentage of 8.00%)
- Added incentive for Blue Distinction Center designation (incentive percentage of 1.00%)
- Added incentive for Blue Distinction Centers Plus designation (incentive percentage of 2.00%)
- Added incentive for CMS STAR rating of 3 (incentive percentage of 0.50%)
- Added incentive for CMS STAR rating of 4 (incentive percentage of 1.00%)
- Added incentive for CMS STAR rating of 5 (incentive percentage of 2.00%)
- Added incentive for Medicare Low Volume status (incentive percentage of 5.00%)
- Streamlined verbiage for HL7/CCD incentives (no effect to percentage amounts)

# PPS QBRP Reporting Dates

## 2024 PPS Quality Based Reimbursement Program

### Reporting Periods

- Period 1 is due by November 5, 2023
- Period 2 is due by May 5, 2024

### Low Volume Incentive

- You must submit your most current cost report (S-3 worksheet) for both periods even if it does not change!
- The number entered on your attestation form is taken from line 1, column 8 of the S-3 worksheet.
- Qualifying events must be from 5/1/22 to 10/31/23 for Period 1 and 11/1/23 to 4/30/24 for Period 2.

### CSR Dates

- Period 1 CSRs will come from submissions between 5/1/2023-10/31/2023
- Period 2 CSRs will come from submissions between 11/1/2023-4/30/2024.

### Data Submissions

- Period 1 data is gathered from discharges between 1/1/2023 to 6/30/2023
- Period 2 data is gathered from discharges between 7/1/2023 to 12/31/2023

### Effective Dates

- Period 1 incentives will be effective January 1, 2024
- Period 2 incentives will be effective July 1, 2024



# Other QBRP Changes

## Surgical & Limited Hospitals

- Streamlined verbiage for HL7/CCD incentives (no effect to percentage amounts)

## ASC & Dialysis Centers

- No 2024 changes

# Other QBRP Reporting Dates

## ASC's

**2024 ASC Quality Based Reimbursement Program**

Reporting Periods	Effective Dates
<ul style="list-style-type: none"> <li>Period 1 is due by November 5, 2023</li> <li>Period 2 is due by May 5, 2024</li> </ul>	<ul style="list-style-type: none"> <li>Period 1 incentives will be effective January 1, 2024</li> <li>Period 2 incentives will be effective July 1, 2024</li> </ul>
Data Submissions	
<ul style="list-style-type: none"> <li>Period 1 data is gathered from discharges between 1/1/2023 to 6/30/2023</li> <li>Period 2 data is gathered from discharges between 7/1/2023 to 12/31/2023</li> </ul>	

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 tcbtks.com

## Surgical Hospitals

**2024 Surgical Quality Based Reimbursement Program**

Reporting Periods	Data Submissions
<ul style="list-style-type: none"> <li>Period 1 is due by November 5, 2023</li> <li>Period 2 is due by May 5, 2024</li> </ul>	<ul style="list-style-type: none"> <li>Period 1 data is gathered from discharges between 1/1/2023 to 6/30/2023</li> <li>Period 2 data is gathered from discharges between 7/1/2023 to 12/31/2023</li> </ul>
CSR Dates	Effective Dates
<ul style="list-style-type: none"> <li>Period 1 CSRs will come from submissions between 5/1/2023-10/31/2023</li> <li>Period 2 CSRs will come from submissions between 11/1/2023-4/30/2024.</li> </ul>	<ul style="list-style-type: none"> <li>Period 1 incentives will be effective January 1, 2024</li> <li>Period 2 incentive will be effective July 1, 2024</li> </ul>

BlueCross BlueShield of Kansas  
 tcbtks.com

## Limited Hospitals

**2024 LMTD Quality Based Reimbursement Program**

Reporting Periods	Data Submissions
<ul style="list-style-type: none"> <li>Period 1 is due by November 5, 2023</li> <li>Period 2 is due by May 5, 2024</li> </ul>	<ul style="list-style-type: none"> <li>Period 1 data is gathered from discharges between 1/1/2023 to 6/30/2023</li> <li>Period 2 data is gathered from discharges between 7/1/2023 to 12/31/2023</li> </ul>
CSR Dates	Effective Dates
<ul style="list-style-type: none"> <li>Period 1 CSRs will come from submissions between 5/1/2023-10/31/2023</li> <li>Period 2 CSRs will come from submissions between 11/1/2023-4/30/2024.</li> </ul>	<ul style="list-style-type: none"> <li>Period 1 incentives will be effective January 1, 2024</li> <li>Period 2 incentives will be effective July 1, 2024</li> </ul>

BlueCross BlueShield of Kansas  
 tcbtks.com

## 2024 QBRP Period 1

### Timeframe

- Data for discharges 1/1/23 to 6/30/23
- CSR\* 5/1/23 to 10/31/23
- PFE 12/31/23 thru 6/30/24
- Low Volume\*
  - Cost Report 10/1/22 to 9/30/23
  - Education Events 5/1/23 to 10/31/23
- Specific to provider types.

### Due Date

11/5/23

### Effective

1/1/24 to 6/30/24

## 2024 QBRP Period 2

### Timeframe

- Data for discharges 7/1/23 to 12/31/23
- CSR\* 11/1/23 to 4/30/24
- PFE by 7/1/23 thru 12/31/23
- Low Volume\*
  - Cost Report 10/1/22 to 9/30/23
  - Education Events 11/1/23 to 4/30/24
- Specific to provider types.

### Due Date

5/5/24

### Effective

7/1/24 to 12/31/24



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# 2024 Contract Changes

# CAH Contract Changes

## 4.1 Credentialing

- Adding Residential Treatment Facilities

## 5.1 Audit Requirements

- When BCBSKS requests medical records for a post pay audit and documentation is not received within 30 business days, BCBSKS will deny for no documentation. Services denied for failure to submit documentation are not eligible for provider appeal and are considered provider write off.

## 6.5 Prior Authorizations

- Lucet – Formerly New Directions Behavioral Health
- Adding Residential Treatment Facilities

# PPS Contract Changes

## 4.1 Credentialing

- Adding Residential Treatment Facilities

## 5.1 Audit Requirements

- When BCBSKS requests medical records for a post pay audit and documentation is not received within 30 business days, BCBSKS will deny for no documentation. Services denied for failure to submit documentation are not eligible for provider appeal and are considered provider write off.

## 6.5 Prior Authorizations

- Lucet – Formerly New Directions Behavioral Health
- Adding Residential Treatment Facilities

## 1.9 Incentive Payments

- The incentive payment for 2024 will continue and be modified to update to a calculation of the percentage based on current data. The updated rate will remain in effect for all of 2024. The incentive payment rate will only be applied to inpatient claim charges that are in excess of the MAP for the MS-DRG assigned to that particular claim.



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# Top 10 Denials



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# Billing Reminders



# Billing Reminders

- Accident Billing
- Billing Department Communication
- Limited Patient Waiver
- Private Room Only Billing
- Claims Pricing
- Preventive Services



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# Medical Policies

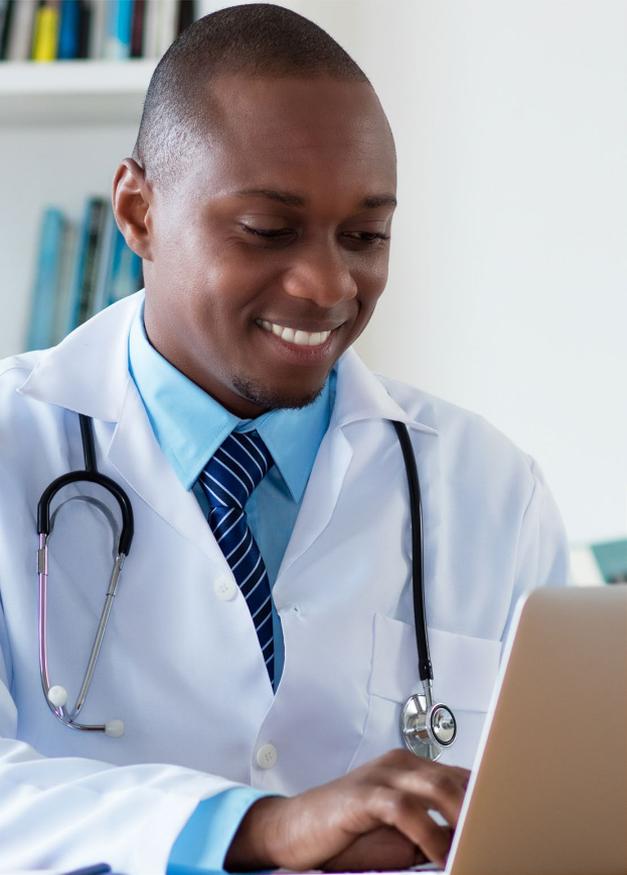
# Most Utilized Medical Policies

- Magnetic Resonance Imaging of the Breast
- Diagnosis and Treatment of Sacroiliac Joint Pain
- Immunoglobulin Therapy
- Germline Genetic Testing for Hereditary Breast/Ovarian Cancer Syndrome and Other High-Risk Cancers (BRCA1, BRCA2, PALB2)
- Intensity Modulated Radiotherapy (IMRT)
- Stereotactic Radiosurgery and Stereotactic Body Radiotherapy
- Lumbar Spinal Fusion
- Dry Needling
- Identification of Microorganisms Using Nucleic Acid Testing (Biofire)
- Testing Serum Vitamin D Levels



14

# **ASK** ADMINISTRATIVE SERVICES OF KANSAS



# Electronic Claim Attachments

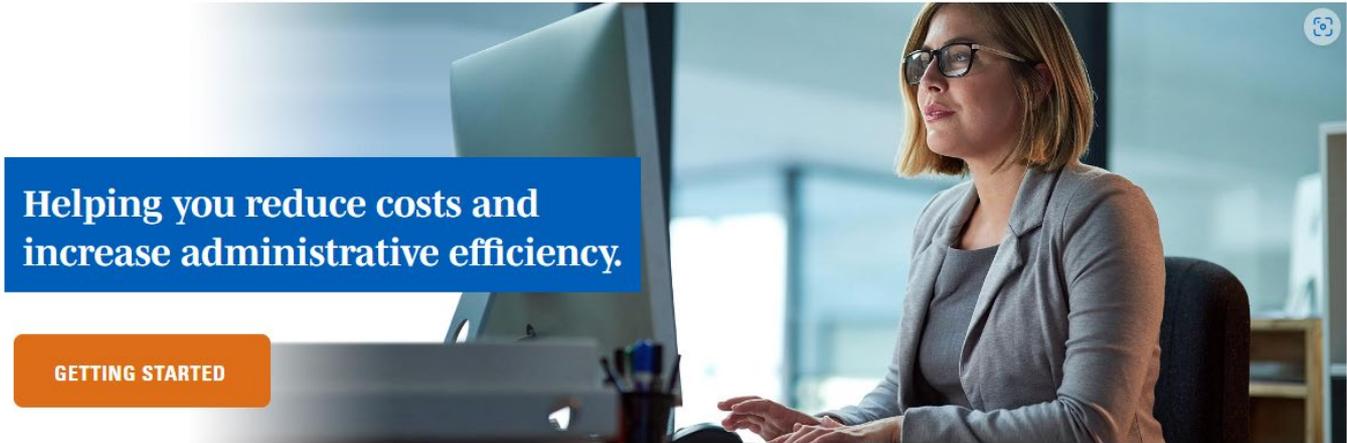
ASK and BCBSKS support electronic claim attachments (ECA) using ANSI X12 transactions.

- Unsolicited
- Solicited
- Pilot Opportunity

## Ways to prepare for ECA

Sign up for latest news updates at [www.ask-edi.com](http://www.ask-edi.com) under Email list.

- Work with your EDI department or EHR vendor to ensure their readiness for ECA
  - Are they able to transmit attachments using X12 transactions and receive corresponding acknowledgments?
  - What version of X12 do they support?
  - Do they support unsolicited, solicited or both?
  - Are attachments included in your current contractual agreement?
    - Is there an additional fee for attachments?
    - Is any additional configuration needed in support of attachments and if so, what lead time is required?



## LATEST NEWS

June 21, 2023  
[Unscheduled System Outage Identified and 277CA Delivery Delay](#)

June 16, 2023  
[RESOLVED: ASK EDI Connection Disruption Due to Vendor Vulnerability](#)

[NEWS RELEASE ARCHIVE](#) →





## News

ASK publishes news posts under Latest News for updates or planned system downtime outside our normal maintenance window.

News posts are typically accompanied by an email sent to anyone that has subscribed to the applicable mailing list.

## Email List

Stay up to date on all things EDI by signing up for one or more of our email lists such as:

- Latest News
- Companion Documents
- Electronic Remits

## Forms

Sign up for electronic remittance advice (ERA) and Medicare crossover 835s by visiting the Forms section.

## Documents

This is where you will find our companion documents, acknowledgments manual and the same links to the ICD-10 editing as found in the Resource Center.

# Resource Center

## Payer News

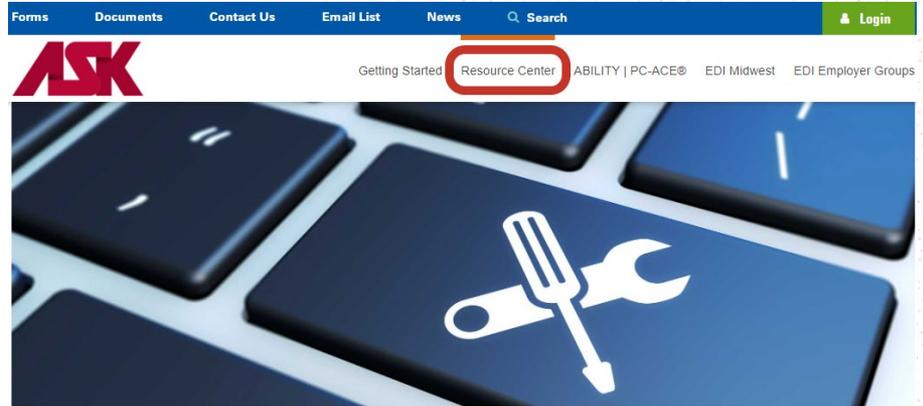
This section under the resource center is where you can locate EDI information specific to BCBSKS.

- Corrected and Voided Claims
- Network Pricing Group Claims
- Secondary to Medicare Claims

## General Information

Here you will find information about the following ICD-10 editing:

- Unacceptable Principal Diagnosis
- Unspecified Laterality
- Unspecified Trimester



## Resource Center

Payer News	+
General Information	+
CAQH-CORE Operating Rules	+
ANSI Testing Guidelines for Batch Transactions	+

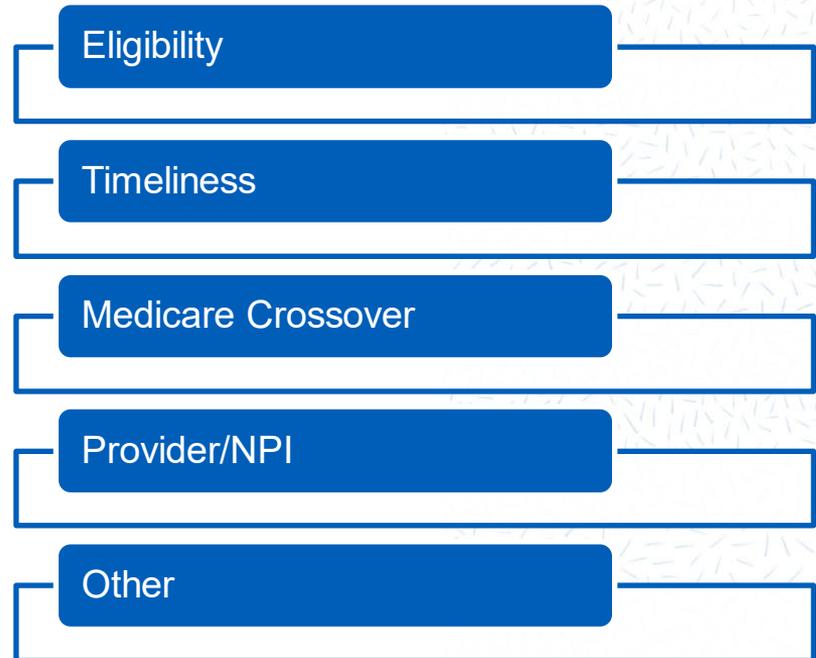
# Electronic Claims

EDI applies approximately 1100 edits per claim

90% of institutional claims received by BCSKS come through EDI

- Once a claim is received in EDI there is no way to stop processing
- Around 9% of the claims EDI receives are rejected and not passed to the payer
  - Detailed information is available per billing NPI
- Assistance in understanding specific claim rejections is available by contacting the EDI help desk
- Results of claim editing are provided via acknowledgment transactions
  - 999 Implementation Acknowledgment
  - 277CA Claim Acknowledgment

Top rejection categories:





# EDI Help Desk

Available 7:00 a.m. – 4:30 p.m. Monday through Friday

1-800-472-6481 option 1

Email: [askedi@ask-edi.com](mailto:askedi@ask-edi.com)

Website: [www.ask-edi.com](http://www.ask-edi.com)

**Please have the following information available when calling**

Billing NPI

Seven-digit trading partner number (if available)

- Claim inquiries
  - Member ID, claim amount, date of service, account number
- Remittance advice inquiries
  - Check date, amount and number

# Resources

[www.ask-edi.com](http://www.ask-edi.com)

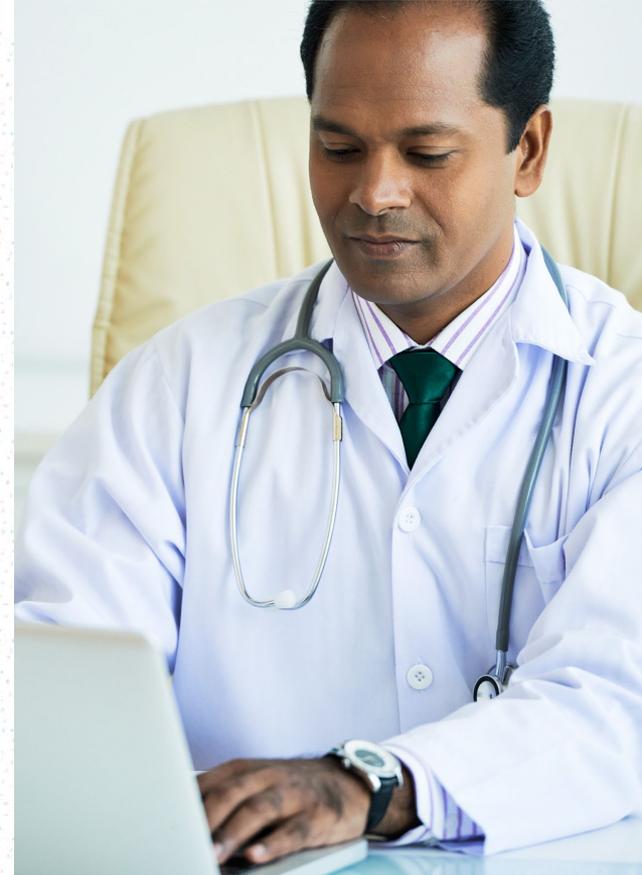
## ABILITY | PC-ACE

- Free billing software

## X12 standardized HIPAA code sets

<https://x12.org/codes>

- Health care code lists
  - Claim status category codes
  - Claim status codes





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