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Sign up to receive IBC news and announcements via email

Do you want to be notified directly about breaking news, publication releases and updates, and changes to our processes and procedures? If so, sign up to receive our provider email.

Email sign-up: www.ibx.com/providers/email

All requests are processed within 48 hours. To prevent your firewall from marking our email messages as spam, please add IBC (provider_communications@ibx.com) to your email address book and provide your information services or information technology contacts with the domains and IP addresses listed on our website.

For professional providers only

Additionally, the IBC Network Medical Directors offer a physician-to-physician email platform, which provides direct and succinct messaging intended to assist physicians in providing quality care to our members. Email topics include the Quality Performance Measure (QPM) score program, announcements of new initiatives, fee schedule reminders, and more.

Participating professional providers are encouraged to join the Network Medical Directors Physician-to-Physician email list.

Physician-to-Physician email sign-up: www.ibx.com/providers/physician_email

We respect your privacy and will not make your email address available to third parties. For more information about our privacy policy, go to www.ibx.com/privacy.

*Partners in Health Update*SM is a publication of Independence Blue Cross and its affiliates (IBC), created to provide valuable information to the IBC-participating provider community. This publication may include notice of changes or clarifications to administrative policies and procedures that are related to the covered services you provide in accordance with your participating professional provider, hospital, or ancillary provider/ancillary facility contract with IBC. This publication is the primary method for communicating such general changes. Suggestions are welcome.

Contact information:

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Personal Choice[®], Keystone 65 HMO, and Personal Choice 65SM PPO have an accreditation status of *Excellent* from the National Committee for Quality Assurance (NCQA).

Keystone Health Plan East has an accreditation status of *Commendable* from NCQA.

For articles specific to your area of interest, look for the appropriate icon:

-  **Professional**
-  **Facility**
-  **Ancillary**

Stay informed during our transition to a new operating platform

We recently mailed a letter to our provider network regarding our transition to a new operating platform for our core processing activities to help us gain efficiencies and lower operating costs.

This letter has been posted on our Provider News Center in the Business Transformation section. In addition, we have posted a Frequently Asked Questions document, which includes answers to questions we have received from participating providers about the transition. We encourage you to visit this site frequently for the most up-to-date information to keep you informed of the upcoming changes and to learn how the changes may affect you.

Go to www.ibx.com/pnc/businesstransformation.

NAVINET®



Stay tuned: Upcoming NaviNet changes

As early as this month, we will begin posting information about transaction changes that will be made to the NaviNet® web portal. Please be sure to frequently visit the NaviNet Transaction Changes section of our Business Transformation site at www.ibx.com/pnc/businesstransformation for the latest news about these changes. *Note:* These changes are a result of our claims processing system transformation to a new platform and were previously communicated to participating providers by mail.

PRODUCTS



Reminder: New IBC products available through health insurance marketplaces

As mandated by the Patient Protection and Affordable Care Act of 2010, each state is required to establish a health insurance marketplace by January 1, 2014. Health insurance marketplaces are new entities that will be set up for consumers to buy health insurance. They will offer a choice of different health plans for those who buy their own individual and/or small group coverage, certify health plans that participate, and provide information to help consumers better understand their health coverage options. IBC will participate in the federally facilitated health insurance marketplace in Pennsylvania by providing various commercial products that are covered under your current Agreement and will be reimbursed in accordance with your payment rates for commercial products.

These commercial products will be available beginning January 1, 2014, and will include tiered provider network products. These lower-cost tiered network products will have benefit designs with different member cost-sharing by tier and will offer members a lower out-of-pocket cost (e.g., copayment) when they select a provider in the preferred benefit tier.

Look for more information about these new products in future editions of *Partners in Health Update*.



Updated payer ID grids now available

The professional and facility payer ID grids were recently updated to reflect new alpha prefixes for account-specific BlueCard® PPO members.

Please be sure to use the most current version of the payer ID grids, which are available on our website at www.ibx.com/edi or on our NaviNet® Plan Central page under Administrative Tools & Resources.



Policy notifications posted as of June 28, 2013

All policies are posted prior to their effective date. Below is a listing of the policy notifications that we have posted to our website as of June 28, 2013.

Policy effective date	Policy No.	Notification title	Notification issue date
February 13, 2013	07.13.14	The Argus® II Retinal Prosthesis	June 17, 2013
July 17, 2013	00.06.02g	Preventive Care Services	June 17, 2013
July 19, 2013	05.00.53e	Airway-Clearance Devices for Use in the Home Setting	June 19, 2013
July 19, 2013	07.10.04b	Parenterally Administered Terbutaline Sulfate for the Prevention or Treatment of Pre-Term Labor	June 19, 2013
July 19, 2013	11.11.05e	Circumcision	June 19, 2013
July 24, 2013	05.00.72b	Upper Limb Prostheses	June 24, 2013
July 24, 2013	11.14.21c	Microprocessor-Controlled Prostheses for Lower-Extremity Amputees	June 24, 2013
August 6, 2013	11.14.07j	Intra-articular Injection of Hyaluronan for the Treatment of Osteoarthritis	May 8, 2013
September 1, 2013	07.03.05o	Sleep Disorder Testing	June 3, 2013

To view the policy notifications, go to www.ibx.com/medpolicy, select *Accept and Go to Medical Policy Online*, and click on the *Policy Notifications* box. You can also view policy notifications using the NaviNet® web portal by selecting *Reference Tools* from the Plan Transactions menu, then *Medical Policy*. Once these policies are in effect, they will be available by using the Search box on the Medical Policy homepage. Be sure to check back often, as the site is updated frequently.

Reminder: An incentive opportunity for professional providers

IBC is offering an incentive to providers who have face-to-face encounters with and submit medical documentation for Medicare Advantage HMO or PPO members who, based on our information, may not have had an office visit with their primary care physician (PCP) in the past year or who may have a chronic condition.

Eligible providers will receive a letter from IBC describing this incentive opportunity along with a list of their IBC members who meet the criteria. By submitting a SOAP (Subjective, Objective, Assessment, and Plan) Progress Note for these members, per the instructions found in the letter you received or will be receiving, providers can earn incentives for the initial submission, as well as any subsequent face-to-face encounters and SOAP Progress Note submissions. We have partnered with Inovalon, Inc., an independent company that provides secure, clinical documentation services, to process member assessments.

The results from your face-to-face encounters can be entered electronically through the NaviNet® web portal. By going to the Eligibility and Benefits Inquiry transaction and selecting the member's Clinical Alert, providers can access the ePASS® system to enter in the appropriate information from the encounter.

After completing each submission, please be sure to report the diagnoses codes on claims submissions that reflect the information submitted in each SOAP Progress Note. It is very important for this information to be aligned to improve the accuracy of the risk adjustment used in IBC incentive programs, such as the Quality Incentive Payment System (QIPS) program for eligible PCPs and the Integrated Provider Performance Incentive Plan (IPPIP) for eligible organizations.

If you have any questions regarding SOAP Progress Notes or ePASS, please contact Inovalon at [1-877-448-8125](tel:1-877-448-8125). For questions about this initiative, please contact Customer Service at [1-800-ASK-BLUE](tel:1-800-ASK-BLUE).

Note: Incentive payments will be sent within 90 days of your submission of the SOAP Progress Note.

Updated policy for intraoperative neurophysiological monitoring



Effective October 1, 2013, IBC's medical policy for intraoperative neurophysiological monitoring (INM) will be updated. Medically necessary remote (i.e., outside the operating room) and non-remote (i.e., inside the operating room) INM will be covered when the physician is monitoring one individual at a time. Previously, for remote and non-remote INM, monitoring of no more than three cases simultaneously was covered. However, the beneficial results of INM are demonstrated when a physician's attention is focused on one individual at a time due to the potential risk for morbidity.

Visit www.ibx.com/medpolicy after July 3, 2013, to review the Policy Notification for Medical Policy #07.03.14i: Intraoperative Neurophysiological Monitoring (INM).

About INM

INM refers to a variety of monitoring modalities used to ensure the integrity of neural pathways during high-risk surgeries, including vascular/cardiovascular, intracranial,

endovascular, spine, orthopaedic, peripheral nerve, and otolaryngologic surgeries. INM is distinct from clinical diagnostic studies. The primary objective of INM is to identify and prevent complications in the nervous system (the spinal cord or the brain), its blood supply, or adjacent tissue, with the expectation that prompt intervention will avert permanent deficits. The American Academy of Neurology recommends that INM testing be reserved for surgical procedures in which there is a significant risk of damage to neural integrity.

INM can identify new neurologic impairment, identify or separate nervous system structures (e.g., around or in a tumor), and demonstrate which tracts or nerves are still functional. INM may provide a surgeon with confirmation that no complications have been detected up to a certain point. This allows the surgeon to proceed with a more thorough surgical intervention.

ClaimCheck® upgrade and edit clarification

ClaimCheck® is a comprehensive code-auditing tool that we use to evaluate the relationships between procedure codes submitted on the CMS-1500 claim form (or equivalent electronic format). Claims are edited by ClaimCheck® to ensure that correct coding rules and guidelines are used. Please note the following information.

Recent upgrade

In an effort to maintain an enhanced level of transparency, the ClaimCheck® software was upgraded from version 9.0.50 to 9.0.51 effective May 13, 2013. This upgrade applies to all contracted providers who deliver professional services to members and bill by way of the CMS-1500 claim form or equivalent electronic format. Upgrades to ClaimCheck® are scheduled twice yearly, typically in the spring and fall. Edits are based on recommendations (sourced) by various nationally accepted authorities, including the American Medical Association, CPT® (Current Procedure Terminology), Centers for Medicare & Medicaid Services, and national specialty societies.

Clarifying edits for reprocessed or adjusted claims

ClaimCheck® and Clear Claim Connection™ are updated regularly for consistency with Medical and Claim Payment Policy, new procedure codes, current health care trends, and/or medical and technological advances. ClaimCheck® clinical relationship logic is applied based on the date a claim is processed, reprocessed, or adjusted in our claims processing system. This logic is not applied based on the date the service was performed. Therefore, claims that are reprocessed or adjusted for any reason may receive a different editing outcome from ClaimCheck® based on the clinical relationship logic that is in effect at the time the claim adjustment occurs. Notwithstanding the foregoing, it is understood that a specific Claim Payment Policy may supersede the terms of ClaimCheck® with respect to the subject of that Claim Payment Policy only. Detailed disclosures of all ClaimCheck® code edits are available through Clear Claim Connection™, which is accessible through the NaviNet® web portal 24 hours a day, 7 days a week.

If you have any questions about ClaimCheck® or Clear Claim Connection™, please contact your Network Coordinator.

HEALTH AND WELLNESS

Health Coaches: Supporting your patients, our members

Health Coaches are available through the following programs to enhance your ability to provide coordinated care for your patients and promote integration of care among members and their families, physicians, and community resources:

- **ConnectionsSM Health Management Program.** Through Connections, condition management is available 24/7/365 to eligible members for common chronic conditions such as asthma, diabetes, COPD, and hypertension.
- **Case management.** Through a Health Coach, case management provides support to members who are experiencing complex health issues or challenges in meeting their health care goals.

For additional information about our Connections Health Management Program and case management, visit our website at www.ibx.com/providers/resources. Members can reach their Health Coach by calling 1-800-ASK-BLUE.



Refer a patient to an IBC Health Coach today by completing the online physician referral form at www.ibx.com/providerforms or by calling 1-800-ASK-BLUE.

Putting ICD-10 into Practice: Coding exercises and scenarios

ICD | 10

More codes • More detail • Improved accuracy™

The coding exercises and scenario in this section are designed to help you put the new ICD-10 guidelines and conventions into practice. An answer key is provided below so you can verify if your answers are correct. In addition, code narratives are included on the next page to describe each ICD-10 code used in the exercises and scenario.

If needed, use the *ICD-10 Spotlight: Know the codes* booklet for assistance with these exercises. It is available at www.ibx.com/icd10.

Specialty focus: Disease of the circulatory system

Coding exercises

Code the following conditions according to ICD-10 coding conventions and guidelines:

1. Atrial fibrillation, permanent
2. Bradycardia
3. Intermittent claudication
4. Deep vein thrombosis, right lower extremity
5. Healed myocardial infarction
6. Ventricular aneurysm
7. Rheumatic aortic regurgitation
8. Biventricular heart failure
9. Hypertensive heart failure
10. Cardiomyopathy from alcohol abuse

Coding scenario

Code the following scenario according to ICD-10 coding conventions and guidelines:

While playing basketball with his sons, Jack began experiencing chest pain, shortness of breath, and light-headedness. His sons rushed him to the hospital, as they suspected he was having a heart attack. The emergency department physician commended the sons for their quick response. Jack was indeed having a heart attack and was diagnosed with an acute non-ST anterior wall myocardial infarction.

R07.9, R06.02, R42, I21.4

Answer to coding scenario:

(1) I48.2 (2) I49.5 (3) I73.9 (4) I82.401 (5) I25.2 (6) I25.3 (7) I06.1 (8) I50.9 (9) I11.0 (10) I42.6, F10.99

Answers to coding exercises:

continued on the next page

Putting ICD-10 into Practice: Coding exercises and scenarios (continued)

ICD | 10

More codes • More detail • Improved accuracy™

Narratives

The following are the corresponding code narratives for each of the codes in the answer key:

ICD-10 code	Code narrative
Exercises	
I48.2	Chronic atrial fibrillation
I49.5	Sick sinus syndrome
I73.9	Peripheral vascular disease, unspecified
I82.401	Acute embolism and thrombosis of unspecified deep veins of right lower extremity
I25.2	Old myocardial infarction
I25.3	Aneurysm of heart
I06.1	Rheumatic aortic insufficiency
I50.9	Heart failure, unspecified
I11.0	Hypertensive heart disease with heart failure
I42.6	Alcoholic cardiomyopathy
F10.99	Alcohol use, unspecified with unspecified alcohol-induced disorder
Scenario	
R07.9	Chest pain, unspecified
R06.02	Shortness of breath
R42	Dizziness and giddiness
I21.4	Non-ST elevation (NSTEMI) myocardial infarction

Please visit the ICD-10 section of our website at www.ibx.com/icd10. On this site you will find additional information related to the transition to ICD-10, including frequently asked questions, examples of how ICD-9 codes will translate to ICD-10 codes in the *ICD-10 Spotlight: Know the codes* booklet, and examples of ICD-10 coding exercises and scenarios in the *Putting ICD-10 into Practice: Coding exercises and scenarios* booklet.

IMPORTANT RESOURCES

Anti-Fraud and Corporate Compliance Hotline	1-866-282-2707 www.ibx.com/antifraud
Care Management and Coordination Case Management	1-800-ASK-BLUE
Baby BluePrints®	215-241-2198 1-800-598-BABY (2229)*
ConnectionsSM Health Management Program	1-800-ASK-BLUE
Credentialing Credentialing Violation Hotline	215-988-1413 www.ibx.com/credentials
Customer Service/Provider Services <ul style="list-style-type: none"> • Provider Automated System (eligibility/claims status/referrals) • Connections Health Management Program • Precertification <ul style="list-style-type: none"> – Imaging services (CT, MRI/MRA, PET, and nuclear cardiology) – Authorizations 	1-800-ASK-BLUE (275-2583)
Provider Services user guide	www.ibx.com/providerautomatedsystem
eBusiness Help Desk	215-241-2305
FutureScripts® (pharmacy benefits) Prescription drug prior authorization Fax	1-888-678-7012 1-888-671-5285
Direct Ship Specialty Pharmacy Program Fax	1-888-678-7012 1-888-671-5285
Mail order program toll-free fax	1-877-228-6162
Blood Glucose Meter Hotline	1-888-678-7012
Pharmacy website (formulary updates, prior authorization)	www.ibx.com/rx
FutureScripts® Secure (Medicare Part D)	1-888-678-7015
Formulary updates	www.ibxmedicare.com
Mail order program toll-free fax	1-877-344-1318
IBC Direct Ship Injectables Program (medical benefits)	www.ibx.com/directship
Medical Policy	www.ibx.com/medpolicy
NaviNet® portal registration	www.navinet.net
Provider Supply Line	1-800-858-4728 www.ibx.com/providersupplyline

* Outside 215 area code