

# Value Based Care Program Attribution

Risk Adjustment Programs for  
Provider Engagement and Education  
2024

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- ✓ *Multiple AAPC certifications qualify for CEU credit*
- ✓ *CEU credits are only available for the live webinar*
- ✓ *Please note, by submitting the request for your CEU, you are attesting that you were present for at least 45 minutes of the presentation.*

#### **To obtain your certificate:**

Complete the questionnaire found at the end of the presentation

When completing the questionnaire:

- Be sure you enter your name and email accurately
- Do not include spaces within your email address

\*Certificates will be emailed within two weeks of the presentation.

*If you have not received your CEU within two weeks, please email us at: [bcbsncriskadj@bcbsnc.com](mailto:bcbsncriskadj@bcbsnc.com)*



# Housekeeping



This Presentation will be available on the Blue Cross NC Provider's Risk Adjustment webpage for educational purposes only.



Please submit questions in the Q&A box



If we cannot answer your question during the session, the response will be emailed to you after the Webinar.

# Disclaimer



This presentation is intended for both physicians and office staff. The information contained in this presentation and responses to the questions are not intended to serve as official coding or legal advice.



All Coding should be considered on a case-by-case basis, should be supported by medical necessity, and the appropriate documentation reflected within the medical record.

# Risk Adjustment Provider Engagement and Education Team



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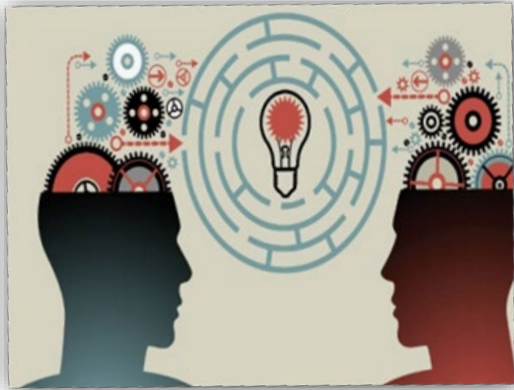


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# Objectives

## After this webinar participants will be able to:

- ✓ Understand which type of attribution is used with each of the BCNC Risk Adjustment Programs
- ✓ Understand how Members are attributed to Provider Groups
- ✓ Understand the process that BCNC uses to attribute Members to Provider Groups
- ✓ Understand what resources to use when additional questions arise



On a scale from 1-5, How well do you understand Attribution as it applies to BCNC risk programs?

1  
Not  
comfortable

2  
Familiar

3  
Neutral

4  
Proficient

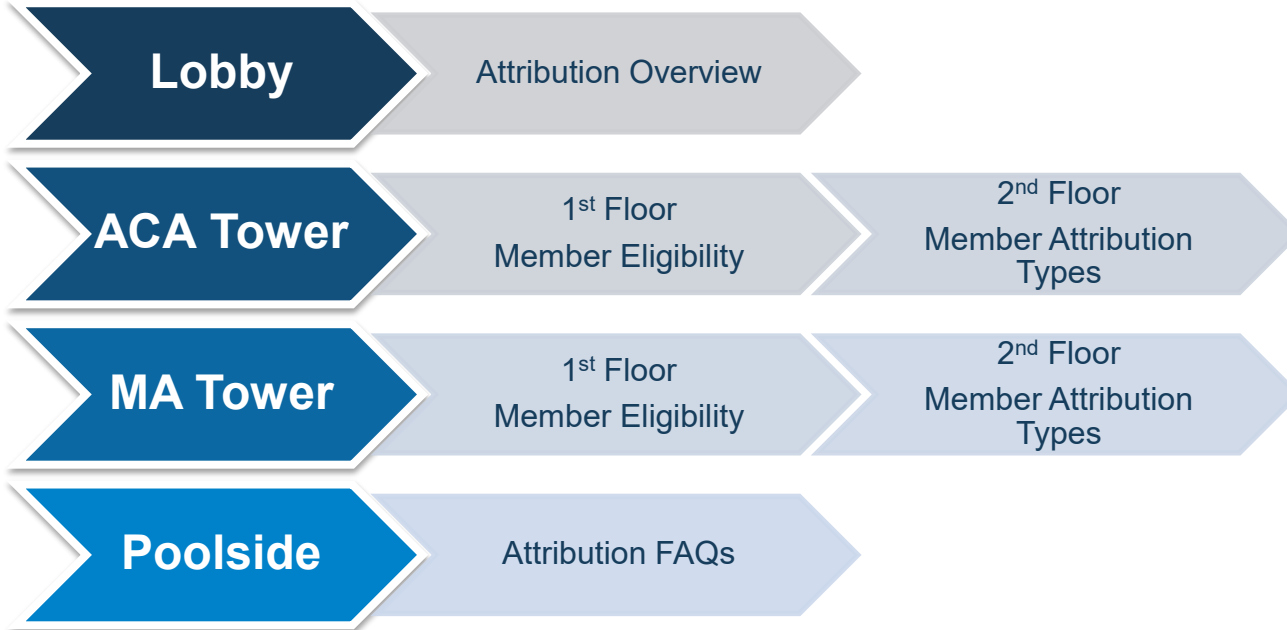
5  
Expert

Who wants to take a trip??

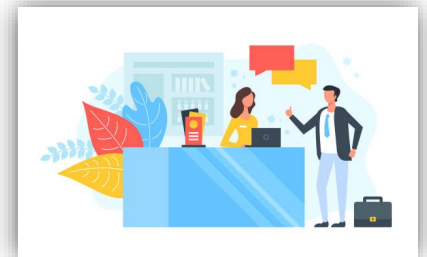




# Welcome to Hotel Blue Cross NC!



# Attribution-Lobby



# What is Attribution?



The act of associating one thing with another



In healthcare, it is the method by which a person is associated with a PCP



The intent is that the healthcare provider will assume some responsibility for the overall care of their attributed persons.

# What is Attribution?

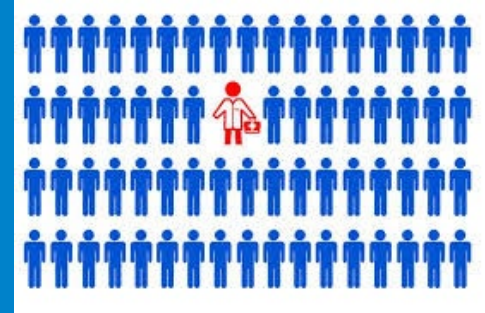
A Patient signs up for BCNC coverage



Patient sees a PCP that accepts BCNC coverage



Patient becomes attributed to that Provider/Provider Group.



What we're going to talk about today

# Attribution

## ACA Tower-First Floor Member Eligibility



## What Members are eligible?

All Members with a BCNC commercial health benefit plan coverage as their primary insurance coverage are eligible to be Attributed Members.

All Members who are actively enrolled in a Blue Cross NC Medicare Advantage health plan are eligible for attribution to a Medicare Advantage Value Based Services Provider.

## How do ACA Members become attributed to a PCP?

First Pass (preferred)-Member selects their PCP

Second Pass-Member is aligned with a PCP based on primary care claims history

Third Pass-Member is aligned based on limited specialty care claims history

- Members assigned-Prospective
- Claims lookback-24 months (First pass looks for PCPs, Second pass looks at Claims for an eligible Specialist)
  - 12 months is reviewed first, if no eligible claim exists, the logic moves to
  - 18 months, if no eligible claim is found, the logic moves to
  - 24 months

***No PCP selected + No eligible claim in 24 months=Patient is unattributed***

# Attribution Hierarchy

The algorithm prioritizes visits with a PCP. Wellness, Primary Care, and E&M-coded visits carry equal weight





## What does Blue Cross NC consider to be a PCP or an eligible Specialist?

Blue Cross NC logic checks Primary Care Claims for the following Practice Specialties:

- General Practice
- Family Medicine
- Internal Medicine
- Multispecialty
- Pediatrics
- Geriatric Medicine

Blue Cross NC logic checks for Specialty Care Claims for the following Practice Specialties:

- Obstetrics & Gynecology
- Cardiovascular Disease
- Endocrinology

***Remember, BCNC logic first looks back through 24 months of Primary Care claims before moving to the Specialty Care claims when looking to attribute a Member to a Provider group.***

## What if an Attributed Member has attributable claims with multiple PCP practices?

- ✓ If an Attributed Member does not have a selected PCP and has attributable claims with multiple PCP practices within the same claims step of the attribution hierarchy, the Member will be attributed to the PCP practice that received the most visits (plurality).
- ✓ If a member does not have a selected PCP and has the **same** number of visits at different PCP provider practices within the same claims step of the attribution hierarchy above, the Member will be attributed to the PCP practice most recently visited.



## What if I see a PCP at an Urgent Care?

- ✓ Attribution goal is to capture primary care services delivered in an Outpatient setting.
- ✓ Blue Cross NC specifically excludes Places of Service where PCP services **are not the principal function**, regardless of the provider specialty designation.



Included Places of Service to receive Primary Care Services

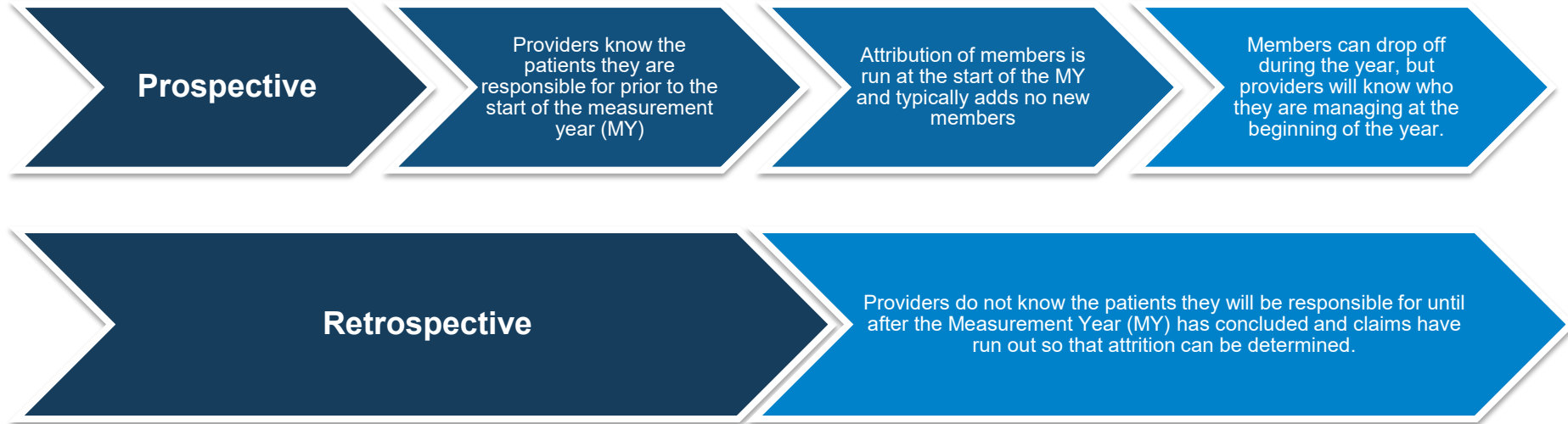
Place of Service Code	Code Type
11	Office
49	Independent Clinic
50	Federally Qualified Health Center
72	Rural Health Clinic
10	Telehealth Provided in Patient's Home
02	Telehealth

# Attribution

## ACA Tower-Second Floor Member Attribution Types



## Prospective Versus Retrospective



Attrition-During a Measurement Year, some members may lose eligibility for various reasons and will be dropped from the locked list of attributed members

## 2024-Blue Premier ACA Prospective Attribution

**Prospective-Blue  
Premier ACA 2024**

Attribution of members will be run  
at the start of the MY

Members may lose eligibility and  
will be dropped from the list of  
Attributed Members.

**Some examples of when a Member would be dropped from the financially accountable pool of prospectively attributed members include:**

- Member terminates coverage with Blue Cross NC completely or has a lapse in coverage of greater than 30 days
- Member moves to a Medicare Advantage plan
- Member moves to a State Health plan
- Member changes enrollment to a narrow network product that uses product-based attribution

# Attribution

## MA Tower-First Floor Member Eligibility



## How do MA Members become attributed to a PCP?



Preferred Method-The Member self-selects a PCP associated with the Medicare Advantage Value Based Service Provider roster.

If a Member does not self-select a PCP:



Blue Cross NC will contact new MA Members within 24 hours of enrollment to select a PCP. Blue Cross NC will contact the Member up to three times- via e-mail or letter, then by phone to select a PCP. This outreach occurs over a 30-day period.



If the Member does not self-select a PCP during the allotted time, the member is attributed based on a qualifying experience within the last 12 months.



Finally, if none of the above processes have led to a PCP assignment, Blue Cross NC will assign a PCP within network adequacy distance standards to the Member (based on their home address) and will notify the Member of this assignment.





## Attribution Period

The period during which a Member is attributed to a specific MA VBSP BEGINS on:

First day of the first month AFTER the month in which the Member self-selects, or is assigned a PCP that is associated with a MA VBSP

The period during which a Member is attributed to a specific MA VBSP ENDS on:

The last day of the month in which the Member self-selects a PCP that is not associated with the MA VBSP or otherwise fails to satisfy attribution criteria (example-inactive enrollment)

## How does a Member choose or change their PCP?



Notify a Customer Service Representative  
at Blue Cross NC via phone



Update via Blue Connect



Send the request via mail

*HMO 888-310-4110  
PPO 877-494-7647*

*[Link to Blue Connect.](#)*

*PO Box 30010  
Durham, NC 27702*

***Members can select a new PCP at any time during a Measurement Year.***

# Attribution

## MA Tower-Second Floor Member Attribution Types



## 2024-Blue Premier MA Prospective Attribution



**Prospective-Blue  
Premier MA 2024**

Attribution of members will be run  
at the start of the MY

Members may lose eligibility and  
will be dropped from the list of  
Attributed Members.

*\*Blue Premier MA contracts may have additional stipulations or exceptions*

# Attribution-Poolside

FAQ for all Blue Premier groups



## This isn't my Patient, why am I responsible for them?



As we have discussed today, the attribution process has multiple steps, and they are different for each population (ACA & MA).



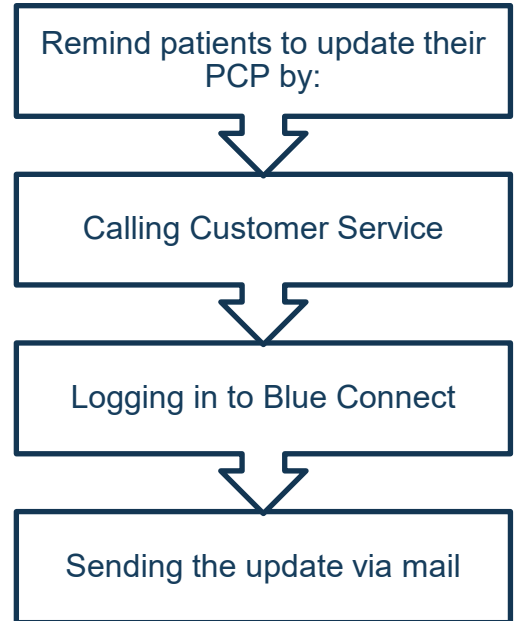
It all comes down to who the patient has selected (or not selected) as their PCP.



We understand that when a patient leaves a practice their first thought isn't to call Blue Cross NC and tell us, but what if they were reminded at the NEW practice to update it?



As always, we welcome feedback related to patients in question using our Provider Feedback Loop found in your monthly HCC Persistency Report.



## That provider has left, why are they and their patients still showing up?

For ACA & MA

Provider Data Management is to be notified monthly with Roster changes for Providers. Inquire within your organization for who is responsible to communicate these with our team.

The patients do NOT follow the provider. The patient should be re-assigned to a provider in the group, and again, reminded to call, login, or mail an update their PCP to Blue Cross NC.

When a provider leaves a group, please make sure the patient is followed by another provider so they will receive adequate follow up care for their chronic conditions.

## Why don't the patients in my risk reports match the ones in my quality reports?



*Your Risk Adjustment Representative is available for questions about the population included on your Risk Reports.  
[bcbsncriskadj@bcbsnc.com](mailto:bcbsncriskadj@bcbsnc.com)*



# Helpful Links:

External Site to Register for Future Offerings:

[2024 Risk Coding Webinars](#)

External Site with Risk Coding Resources for Providers and Coders:

[Previously Hosted Webinars & Coding Resources](#)

[Link to share Feedback](#)



[Link to get your CEU credit](#)



Blue Cross NC Provider Engagement & Education Risk Adjustment team is available for custom educational requests for Risk Coding education.



Please send questions & requests to:



[BCBSNCRiskAdj@bcbsnc.com](mailto:BCBSNCRiskAdj@bcbsnc.com)

# Resources



<https://www.soa.org/globalassets/assets/Files/resources/research-report/2018/patient-attribution.pdf>

MA VBSP Manual

Value Based Services ACO Provider Manual