

Provider Update

Issued: April 5, 2010

Blue Medicare HMOSM and Blue Medicare PPOSM products now offered by BCBSNC

Effective April 1, 2010, Blue Medicare HMO and Blue Medicare PPO became product offerings of Blue Cross and Blue Shield of North Carolina (BCBSNC). Blue Medicare HMO and Blue Medicare PPO are Medicare Advantage products offered by BCBSNC under contracts with Medicare. These products provide Medicare beneficiaries with their original Medicare benefits plus enhanced coverage and benefits.

Blue Medicare HMO and Blue Medicare PPO products are not new products to BCBSNC. These products were formerly offered by PARTNERS National Health Plans of North Carolina, Inc. (PARTNERS) and administered by BCBSNC, PARTNERS' parent company. In January of this year, we wrote to PARTNERS network-participating providers to notify them of our plans to merge PARTNERS into its parent company BCBSNC upon regulatory approval. We received the necessary approval and now BCBSNC holds the contracts with Medicare to offer Blue Medicare HMO and Blue Medicare PPO, as of the merger effective date of March 31, 2010. Subsequently, when we opened our doors for business on April 1, 2010, the former PARTNERS products were reintroduced as BCBSNC products.

Important information about contracts and provider participation for the Blue Medicare HMO and Blue Medicare PPO networks

Only providers who currently have contracts to provide services to Blue Medicare HMO and Blue Medicare PPO members are considered as in-network and participating providers. This means that if you have a contract with BCBSNC to provide services for our commercial lines of business but do not have a contract with BCBSNC to provide services to Blue Medicare HMO and Blue Medicare PPO members, any services that you provide to Blue Medicare HMO and Blue Medicare PPO members will be considered as out-of-network. Providers who do not have contracts for participation in the Blue Medicare HMO and Blue Medicare PPO networks are encouraged to contact their regional Network Management office to begin the process of joining the networks.

Providers who already have contracts for participation in the Blue Medicare HMO and Blue Medicare PPO networks do not need to obtain new contracts as a result of the merger. Existing contracts (*along with all contract responsibilities*) have been transferred from PARTNERS to BCBSNC.

Member identification cards for Blue Medicare HMO and Blue Medicare PPO members

If your health care organization arranges care or provides services to Blue Medicare HMO and Blue Medicare PPO members, you'll likely see two versions of our member identification cards for the remainder of 2010. Members who were enrolled in a Blue Medicare HMO or Blue Medicare PPO plan prior to April 1, 2010, will retain their same member ID cards displaying the PARTNERS business name. Members who are enrolled after April 1, will receive new cards that display the BCBSNC name. Either way, members will carry a card that displays the product name for the plan in which they are enrolled i.e. Blue Medicare HMO or Blue Medicare PPO.

Reminders for arranging care and handling administrative functions

There are no changes in the operational processes you experience in your service to our members as a result of this merger – all claims, utilization management, customer services and network support remain the same.

Claims:

Continue to send claims for your Blue Medicare HMO and Blue Medicare PPO patients just as you have been, either electronically or by paper. Just remember that now you are sending to BCBSNC instead of PARTNERS. We'll continue to process claims at our Winston-Salem location. If sending paper claims mail to:

BCBSNC
P.O. Box 17509
Winston-Salem, NC 27116

Please remember to properly route your claim submissions, so that claims filed to BCBSNC for Blue Medicare HMO and Blue Medicare PPO member services reach their Winston-Salem destination. Claims routed in error to P.O. Box 2291 will be delayed from processing.

HealthTrio Connect:

HealthTrio Connect remains the secure Internet site for conducting electronic transactions for Blue Medicare HMO and Blue Medicare PPO member services. If your health care organization currently use Blue e, it's important to note that Blue e cannot be used to conduct transactions for the Blue Medicare HMO and Blue Medicare PPO products. Claims activity for Blue Medicare HMO and Blue Medicare PPO by use of Blue e will be rejected by the Blue e system.

Provider Line Customer Service:

If you're in need of assistance and want to speak with Customer Service about a Blue Medicare HMO or Blue Medicare PPO related issue, call us on the Provider Line using the same phone number **1-888-296-9790** — or if calling locally **(336) 774-5400**.

Healthcare Services:

Contacting Healthcare Services and arranging services for Blue Medicare HMO and Blue Medicare PPO members has not changed. Healthcare services can still be reached by calling either **1-888-296-9790** or if calling locally **(336) 774-5400**.

We've made updates

We've made updates to our forms and other Blue Medicare HMO and Blue Medicare PPO materials to add our BCBSNC name. You'll begin to see these changes over the coming weeks as you conduct Blue Medicare HMO and Blue Medicare PPO transactions. We've updated the provider Explanation of Payment (EOP) form to include the BCBSNC name and along with this, we've updated the EOP form by adding space for the submitted and paid units. The member's Explanation of Benefit (EOB) form was updated too, which now includes a field for the member's name. We've also made updates to new standard Provider Form Agreements (*updates to the standard contracts were made consistent with all other BCBSNC standard form agreements*). We've changed the look-back recovery period to 18 months, making the Overpayment Recovery Look-Back Period consistent with other Medicare related business (*i.e. Medicare Supplement*). Additionally, the refund request form has been updated to include the procedure code.

Reminder about BCBSNC SupplementSM Plans and Blue Medicare RxSM

In addition to our Blue Medicare HMO and Blue Medicare PPO plans, BCBSNC offers Blue Medicare Supplement plans and Blue Medicare Rx plans. BCBSNC Blue Medicare Supplement products allow members to receive services from any Medicare-participating doctor, hospital or clinic. Blue Medicare Rx is our Medicare Prescription Drug benefit (Part D) plan, which requires use of in-network pharmacies. These products are different from Blue Medicare HMO and Blue Medicare PPO and if your health care business is contracted to provide care for Blue Medicare HMO and Blue Medicare PPO members, it is important for you to know that Blue Medicare Supplement and Blue Medicare Rx are not included in that agreement.

If you have questions

If you have questions about the merger and/or the Blue Medicare HMO and Blue Medicare PPO products, please give us a call. We have regional Network Management staff available to assist you. Additionally, if you are not yet contracted for participation in the Blue Medicare HMO and Blue Medicare PPO networks, please contact your regional Network Management office to discuss your joining.

Network Management Regional Contact Information:

Wilmington 1-877-889-0001	Charlotte 1-800-754-8185	Hickory 1-877-889-0002
Greenville 1-800-777-1643	Greensboro 1-888-298-7567	Raleigh 1-800-777-1643

- Existing contracts allow BCBSNC to take on PARTNERS contract responsibilities. Existing contracts remain in effect, including reimbursement and other provider procedures.

- Providers who are not contracted for participation in the Blue Medicare HMO and Blue Medicare PPO networks are considered as out-of-network providers for providing services to Blue Medicare HMO and Blue Medicare PPO members.

- Blue Medicare HMO members do not have out-of-network benefits unless approved in advance by BCBSNC (*or when necessary due to urgent or emergent care needs*).

- Blue Medicare PPO members do have out-of-network benefits but are encouraged to seek care from in-network providers to have reduced out-of-pocket expense.

- Member ID's are not changing. Members enrolled in Blue Medicare HMO and Blue Medicare PPO plans are easily recognizable by the alpha prefix that's included as part of their complete member identification as listed on the Blue Medicare HMO and Blue Medicare PPO member identification cards.

- YPW — When you see the alpha prefix of YPW as the first three letters of a members ID, you'll know that the member's coverage type is a Blue Medicare HMO plan.

- YPF — When you see the alpha prefix of YPF as the first three letters of a members ID, you'll know that the member's coverage type is a Blue Medicare HMO plan.

- Always verify a member's benefits and eligibility with BCBSNC in advance of providing scheduled services to ensure that coverage is available.

Visit us on the Web

The Blue Medicare HMO and Blue Medicare PPO resources and information page for providers has not changed. It can still be found on the [bcbsnc.com](http://www.bcbsnc.com) Web site located at:

<http://www.bcbsnc.com/content/providers/blue-medicare-providers/index.htm>.

Blue Medicare HMO and Blue Medicare PPO Prior Authorization: <http://www.bcbsnc.com/content/providers/blue-medicare-providers/policies-and-responsibilities/prior-authorization.htm>.

Blue Medicare HMO and Blue Medicare PPO Formulary Home: <http://www.bcbsnc.com/medicare/formulary-home.cfm>.

Blue Medicare HMO and Blue Medicare PPO Blue Book Provider Manual: http://www.bcbsnc.com/assets/providers/public/pdfs/Provider_Manual.pdf.



**BlueCross BlueShield
of North Carolina**