

May 4, 2020
Virtual Rounds



NC



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Please visit [BlueCrossNC.com/coronavirus-providers](https://www.bluecrossnc.com/coronavirus-providers) for the most up-to-date information

VIRTUAL ROUNDS WITH DR. JANET MCCAULEY, DR. LARRY WU AND GLENNA MCMENAMIN



Agenda

- + Brief overview of all Blue Cross NC COVID-19 measures
 - Extension of deadlines
- + Latest news
 - Follow-up on last week's Q&A
 - Extensions of authorizations for elective procedures
 - Telehealth reimbursement update
 - Out-of-network provider policies
 - In-network lab updates
- + Q&A
 - Please hold your questions until we open Q&A.
- + Next steps
 - We will post these slides at BlueCrossNC.com/Coronavirus-Providers.

Please note:

There is a slight delay in the webinar feed. Please keep this in mind as we proceed.

There have been technical issues across all platforms due to increased usage. Close your window and rejoin the webinar if you're having issues.



BRIEF OVERVIEW OF ALL BLUE CROSS NC MEASURES FOR COVID-19

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BRIEF OVERVIEW OF ALL BLUE CROSS NC MEASURES FOR COVID-19

COVID-19 (Coronavirus)

Measures We're
Taking to Support
Members and
Clinicians

For the latest updates, please visit
[BlueCrossNC.com/Coronavirus](https://www.BlueCrossNC.com/Coronavirus)



Expanded Telehealth
Measures



Blue Cross NC is waiving
member cost-sharing for
COVID-19 clinical visits, testing
and related treatments.



No Prior Authorization for
COVID-19 Testing.

Notification Only for Some
PPA Requirements.



Members with suspected and
confirmed COVID-19 diagnosis:
No prior authorization for
diagnostic tests and covered
services that are medically
necessary based on CDC
guidelines.



Refill Medications Early

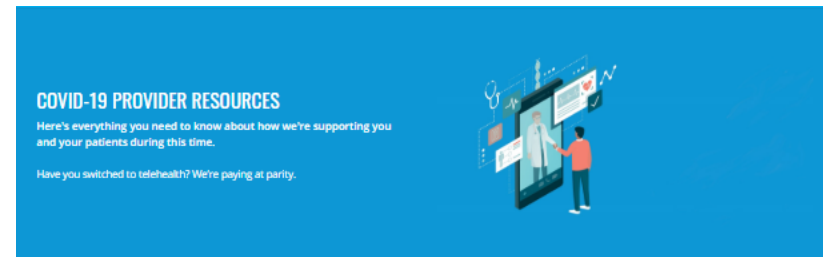
BRIEF OVERVIEW OF ALL BLUE CROSS NC MEASURES FOR COVID-19



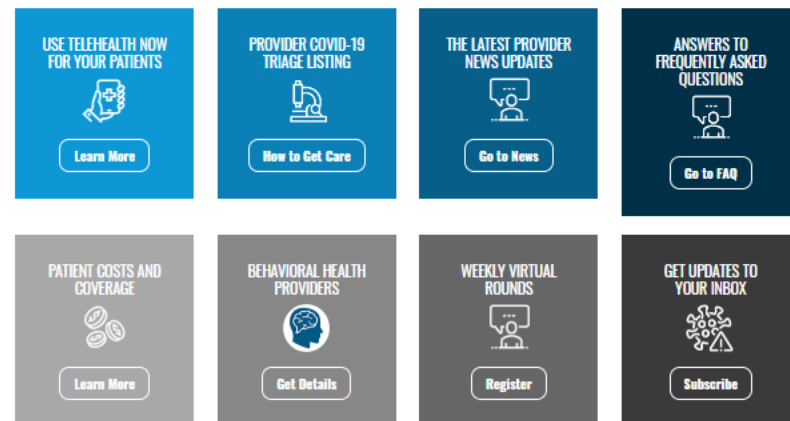
How our measures apply to patients

- + At a high level, all measures available to:
 - Fully insured (group and individual)
 - High-deductible health plan, Medicare Advantage (includes Experience Health)
 - State Health Plan, *except the drug benefit (administered through CVS)*
 - **PLEASE NOTE:** We are working with self-funded groups to revise their benefits for each measure. We can't guarantee benefits or payments for self-funded, FEP or IPP. Use the contacts on the back of a patient's card to verify benefits for these plans.

BlueCrossNC.com/Coronavirus-Providers



PROVIDER RESOURCES AT A GLANCE



DEADLINE EXTENSION



The following measures will be extended for an additional 30 days starting on May 5, 2020, with an expiration date of June 4, 2020.

- + Expanded telehealth measures

- + Waiving member cost-sharing (copays, deductibles and coinsurance) for:
 - Vendor-based telehealth
 - COVID-19 related health care visits and diagnostic testing that are ordered by a provider and FDA cleared, approved or authorized
 - COVID-19 related treatment that is medically necessary and consistent with CDC guidance if a member is diagnosed with or has a suspected diagnosis of COVID-19 (Please note: This measure was created with a 60-day expiration date, which technically means it will expire on June 1, 2020; however, we will reevaluate this with the measures listed above for additional extensions.)

- + We will reevaluate if an additional extension is needed as we get closer the new expiration date.

The following measures will be extended through May 31, 2020:

- + Refilling patient medications early
 - Please note: This measure is set to expire on May 31, 2020, as it follows the North Carolina state of disaster announcement. Therefore, it may be renewed based on the state's decisions.

- + Waiving prior authorization requirements
 - For diagnostic tests and covered services that are medically necessary and consistent with CDC guidance for members who are diagnosed with or have a suspected diagnosis of COVID-19
 - For emergent non-elective inpatient admissions and post-acute care services; in place of prior authorization, providers must give a 24-hour notification for such services.

- + We are closely monitoring the COVID-19 pandemic. If there is a surge in COVID-19 cases, we will consider extending these COVID-19 measures beyond May, 31, 2020. We will post an update by May 22, 2020.



LATEST NEWS

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Has there been any information published about extending prior authorizations for elective procedures that have already been approved?

- + Blue Cross and Blue Shield of North Carolina (Blue Cross NC) is extending existing authorizations for in-network providers for all commercial elective inpatient admissions and most commercial outpatient services, that REQUIRE prior authorization, to be performed on or before October 1, 2020.
- + Blue Cross NC recognizes that call volume from patients likely will increase post-pandemic and that providers have delayed elective services to help flatten the curve.
- + This measure seeks to support providers by eliminating the need to conduct additional medical necessity review on a procedure that has already been approved. **[Please see the Provider News update for details, including specifics for Commercial vs. Medicare members and specific coverage for commercial inpatient vs. outpatient services.](#)**

Are there limits to telehealth visits (overall number of visits, number of visits per day for the patient, number of visits per practice)? Can a patient have a regular telehealth visit with a physician and also have behavioral health visit the same day with another provider under the same Tax ID number (different billing NPI)?

- + Providers should follow the same frequency limits and guidelines as are in place for face-to-face visits. The same claims editing will apply.

FOLLOW-UP ON LAST WEEK'S Q&A



Can you clarify IPP again?

Example patient scenario	Benefit coverage	Provider reimbursement
Patient has a Blue Cross NC commercial plan but is currently living in Texas. The patient has a physical therapy telehealth visit with a PT provider practicing in Texas.	<p>This is an Inter-Plan Program (IPP) Home member.</p> <p>The normal cost-sharing (copays, deductibles, coinsurance) dictated by the patient's Blue Cross NC commercial benefits would apply.</p>	<p>BlueCross BlueShield of Texas reimbursement policy would apply.</p> <p>The reimbursement to providers for telehealth is dependent upon the Blues plan where the provider is practicing. The provider should contact the plan where they practice for reimbursement information.</p>
Patient is a member of BlueCross BlueShield of Texas but is currently living in North Carolina. The patient has a physical therapy telehealth visit with a PT provider practicing in North Carolina.	<p>This is an IPP Host member.</p> <p>BlueCross BlueShield of Texas member benefits apply.</p>	<p>Blue Cross NC reimbursement policy applies, but BCBS TX benefits could override our payment policy.</p> <p>The host plan's reimbursement policy applies. The provider should contact the plan where they practice for reimbursement information.</p>

What code should/could we use for billing personal protective equipment (PPE) above and beyond what our practice would usually use? For example, how would we code if we are a pediatric practice and needed to see a child in full PPE due to suspected COVID? Can we use 99070? If so, should we use a modifier?

- + Blue Cross NC does not pay separately for PPE, as this would be included in any services billed by the provider.

I'm still not being paid at parity for telehealth/I still haven't received my correct reimbursement. Do you have updates?

- + The team now has updated 87 percent of claims that previously were not paid at parity
- + Due to the significant increase in telehealth claim volume it is taking longer than anticipated to reprocess all affected telehealth claims
- + Please wait to contact us about your claim until after your explanation of payment (EOP) has been posted. If your EOP is incorrect, [fill out this form found on our provider coronavirus webpage](#), and a member of the team will contact you.
- + As a reminder, we cannot guarantee reimbursement for patients who are on other Blues plans or who are being treated outside of North Carolina

Extensions of authorizations for elective procedures

- + Extending existing authorizations for in-network providers for all commercial elective inpatient admissions and most commercial outpatient services to be performed **on or before October 1, 2020**
 - NOTE: Elective procedures still require a medical necessity review and are not part of recent prior authorization waivers
- + This measure seeks to support providers by **eliminating the need to conduct additional medical necessity review** on a procedure that has already been approved
- + Learn more via our [Provider News article](#).

Out-of-network – COVID-19 reimbursement policies

- + Blue Cross NC recognizes that providers are also focused on ensuring their patients receive the care they need during this critical time. In light of the recent federal laws on COVID-19 care and North Carolina law regarding price controls in a State of Emergency, the reimbursement levels for this medical care must be established at a reasonable level.
- + To that end, Blue Cross NC has established the following claims and reimbursement policies for out-of-network providers in North Carolina to ensure access to care for members and reasonable reimbursement for providers. (This applies to claims for COVID-related services.)
- + The following applies to all Blue Cross NC under-65 commercial products, including self-funded and Administrative Services Only (ASO) plans administered by Blue Cross NC such as the State Health Plan. For Medicare products, we will follow applicable CMS regulations on out-of-network reimbursement. For guidance on FEP members, visit <https://www.fepblue.org/en/coronavirus-updates>.

Out-of-network – COVID-19 reimbursement policies

- + For North Carolina health care providers participating in Blue Cross NC's broad Preferred Provider Organization (PPO) network who are out-of-network for one or more of our smaller network products (such as Blue ValueSM, Blue Home SM, or any Blue Local SM product):
 - Blue Cross NC will be paying these out-of-network providers directly, at a 100 percent benefit level, priced at the negotiated PPO rates in place with the provider.

- + For North Carolina health care providers who do not participate in Blue Cross NC's broad PPO network:
 - Blue Cross NC will be paying out-of-network providers directly. Blue Cross of NC will contact out-of-network providers within 24-48 business hours to gather information needed to process a claim. This fee schedule is based on reasonable rates derived using sources such as Medicare and average in-network rates, depending on the provider type and the applicable codes. Direct payment is not Blue Cross NC's acceptance of an assignment of member benefits.

Out-of-network – COVID-19 reimbursement policies

- + In all instances for these COVID-19 services, we intend to ensure that our qualified members are not balance billed above the reimbursement paid by Blue Cross NC as outlined above.

- + If an out-of-network provider determines that it cannot accept the Blue Cross NC reimbursement received as payment in full, please do not bill the member.
 - The provider should contact Blue Cross NC's Provider Blue Line at 800-214-4844 or [complete this form](#), rather than billing the member. Blue Cross NC will then work with that provider to determine next steps in keeping with applicable laws on coverage and price controls.

Out-of-network – COVID-19 reimbursement policies

- + For COVID-19 treatment visits, please use the ICD-10 diagnostic code U07.1, COVID-19 virus identified, in the primary position. For COVID-19 screening visits please use either ICD-10 code Z03.818 in the primary position for a possible COVID-19 exposure or ICD-19 Z20.828 for a suspected COVID-19 exposure.
- + This policy applies until further announcement for claims associated with treatment of qualified members with dates of service on or after May 01, 2020, for the screening, testing, or treatment of COVID-19.

In-network lab capacity

- + Avalon is tracking capacity updates for in-network COVID-19 PCR and Antibody testing and will continue to identify additional labs with testing capability.
- + These updates and additional insights into the Coronavirus pandemic are available on the Avalon website at www.avalonhcs.com

Lab	PCR Y/N	Multi?	Capacity (per day)	TAT	AntiBody Y/N	Capacity (per day)	TAT
LabCorp	Y	Y	65,000	1-2 days	Y	100,000	1-3 days
Quest	Y	Y	50,000	1-2 days	Y	150,000	1-2 days
BioReference	Y	Y	20,000	1-2 days	Y	TBD	3 days
CPL (Clinical Pathology Lab) (Sonic)	Y	Y	20,000	1-3 days	Y	100,000	24 hrs
Mako Medical Lab	Y	Y	12,000	1-3 days	Y	11,000	1 day
Premier Medical Lab	Y	Y	10,000	1-3 days	Y	6,000	1-2 days
PathGroup	Y	Y	2,200	1-2 days	Y	500	1 day
Eurofins-Diatherix**	Y	N	5,000	1-2 days	Y	5,000	2-4 days
MDL (Medical Diagnostic Lab)	Y	N	5,000	1-3 days	Y	500	1-3 days
LabTech	Y	N	1,000	1-2 days	Y	3,000	1 day
SMA	Y	Y	500	1 day	N	N/A	
LAIT (American Institute of Tox)	Y	Y	5,000	1-2 days	N	N/A	
Inform Diagnostics	Y	N	200	1-2 days	N	N/A	
BAKO	Y	N	2,500	1-2 days	N	N/A	
Precision Genetics	Y	N	2,400	1 day	N	N/A	
Wake Medical Lab Consultants	Y	Y	1,000	1 day	N	N/A	
Neogenomics	Y	Y	1,000	1-4 days	N	N/A	

Q&A

Please follow the instructions on the next slide.

Instructions

- + Use the Q&A box under the webinar screen.
- + Read the questions that are published before submitting your own.
- + Please do not submit duplicate questions. Instead, click the heart to vote for the question.
- + We will answer the questions with the most votes first.

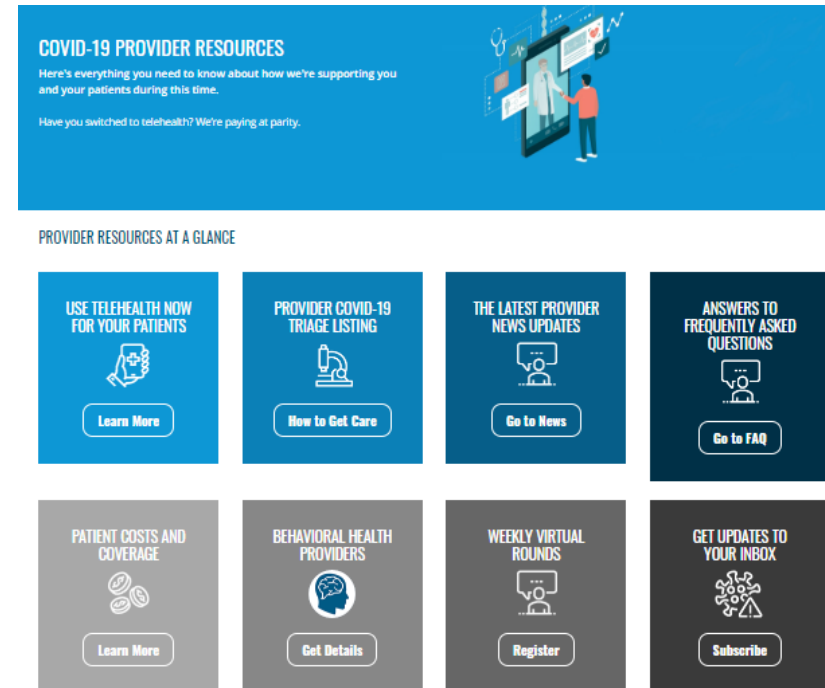


NEXT STEPS

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




Latest information

- + Visit BlueCrossNC.com/Coronavirus-Providers.
- + We will post the slides on this page.
- + Remember to sign up for E-briefs.
- + Join us for weekly "Virtual Rounds" with Dr. Janet McCauley, Dr. Larry Wu and Glenna McMenemy every Monday from 1-2 p.m. [Sign up in our registration form.](#)



COVID-19 PROVIDER RESOURCES
Here's everything you need to know about how we're supporting you and your patients during this time.
Have you switched to telehealth? We're paying at parity.

PROVIDER RESOURCES AT A GLANCE

USE TELEHEALTH NOW FOR YOUR PATIENTS  Learn More	PROVIDER COVID-19 TRIAGE LISTING  How to Get Care	THE LATEST PROVIDER NEWS UPDATES  Go to News	ANSWERS TO FREQUENTLY ASKED QUESTIONS  Go to FAQ
PATIENT COSTS AND COVERAGE  Learn More	BEHAVIORAL HEALTH PROVIDERS  Get Details	WEEKLY VIRTUAL ROUNDS  Register	GET UPDATES TO YOUR INBOX  Subscribe



THANK YOU

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