



Provider Newsletter

June 2021



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COVID-19 information from Healthy Blue

Healthy Blue is closely monitoring COVID-19 developments and how the novel coronavirus will impact our customers and provider partners. Our clinical team is actively monitoring external queries and reports from the Centers for Disease Control and Prevention (CDC) to help us determine what action is necessary on our part.

For additional information, reference the COVID-19 Updates page on our [website](#).

Members' Rights and Responsibilities Statement

The delivery of quality healthcare requires cooperation between patients, their providers, and their healthcare benefit plans. One of the first steps is for patients and providers to understand their rights and responsibilities. Therefore, in line with our commitment participating practitioners and members in our system, Healthy Blue has adopted a *Members' Rights and Responsibilities Statement*, which is located within the provider manual.

If you need a physical copy of the statement, call Provider Services at **833-405-9086**.

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Keeping up with routine vaccination during COVID-19

Well-child visits and vaccinations are essential services

In May 2020, the CDC released a report showing a drop in routine childhood vaccinations as a result of COVID-19, a result of stay-at-home orders, and concerns about infection during well-child visits. Both the American Academy of Pediatrics and the CDC recommend the continuation of routine childhood vaccinations during the COVID-19 pandemic, noting they are essential services.

To encourage well-visits and vaccinations, here are some extra steps you can take to ensure visits are as safe as possible for both patients and staff. They include:

- Scheduling sick visits and well-child visits during different times of the day.
- Asking patients to remain outside until it's time for their appointment to reduce the number of people in waiting rooms.
- Offering sick visits and well-child visits in different locations.

It is important to identify those children who have missed immunizations and well-child visits to schedule these essential in-person appointments. To help, the CDC has published [vaccine catch-up guidance](#) on their website.

Help your patients earn rewards

For additional encouragement, Healthy Blue members can earn \$25 or more in gift cards for completing vaccines and/or well visits through our Healthy Rewards program. Please encourage your patients to enroll in the program on the Healthy Blue website so they can earn rewards for these activities.

See chart below:

Healthy Blue	Child and Adolescent Well Care Visits (WCV)
Ages	3 to 21
Reward amount	\$25

Patients can enroll online or by calling **888-990-8681 (TTY 711)**.

Helpful information for keeping babies and children healthy:

Childhood Immunization Status (CIS) Combination 10 HEDIS® measure requires that all children are immunized by their 2nd birthday:

- Four DTap (diphtheria, tetanus and acellular pertussis)
- Three IPV (polio)
- One MMR (measles, mumps, rubella)
- Three HiB (H influenza type B)
- Three Hep B (hepatitis B)
- One VZV (chicken pox)
- Four PCV (pneumococcal conjugate)
- One Hep A (hepatitis A)
- Two or three RV (rotavirus)
- Two influenza (flu)



[View billing codes online.](#)

HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA).

BMO-NL-0034-21



Updates to the AIM Specialty Health *Advanced Imaging Clinical Appropriateness Guidelines*

Effective for dates of service on and after September 12, 2021, several updates will apply to the AIM Specialty Health®* (AIM) *Advanced Imaging Clinical Appropriateness Guidelines*. Part of the AIM guideline annual review process, these updates are focused on advancing efforts to drive clinically appropriate, safe and affordable healthcare services.

 **Read more online.**

* AIM Specialty Health is an independent company providing some utilization review services on behalf of Healthy Blue.

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MCG Care Guidelines 25th edition

Effective September 1, 2021, Healthy Blue will upgrade to the 25th edition of MCG Care Guidelines for the following modules: Inpatient and Surgical Care (ISC), General Recovery Care (GRC), Chronic Care (CC), Recovery Facility Care (RFC), and Behavioral Health Care (BHC). Tables in the full article highlight new guidelines and changes that may be considered more restrictive.

 **Read more online.**

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Important information about utilization management

Our utilization management (UM) decisions are based on the appropriateness of care and service needed, as well as the member's coverage according to their health plan. We do not reward providers or other individuals for issuing denials of coverage, service, or care. Nor do we make decisions about hiring, promoting, or terminating these individuals based on the idea or thought that they will deny benefits. In addition, we do not offer financial incentives for UM decision makers to encourage decisions resulting in underutilization. Our medical policies are available on our [provider website](#).

You can request a free copy of our UM criteria from Provider Services at **833-405-9086**. Providers can discuss a UM denial decision with a physician reviewer by calling us toll free at the number listed below. Access UM criteria [online](#).

We are staffed with clinical professionals who coordinate our members' care and are available 24/7 to accept precertification requests. Secured voicemail is available during off-business hours. A clinical professional will return your call within the next business day. Our staff will identify themselves by name, title, and organization name when initiating or returning calls regarding UM issues.

You can submit precertification requests by:

- Using the Interactive Care Reviewer (ICR) application, our preferred digital method, by visiting The [Availity* Portal](#) from Availity's home page, select Patient Management > Authorizations & Referrals
- Faxing to **800-964-3627** (medical)
- Faxing to **844-462-0026** (behavioral health outpatient)
- Faxing to **844-462-0025** (behavioral health inpatient)
- Calling us at **833-405-9086** (medical and behavioral)

Have questions about medical or behavioral health utilization decisions or the UM process?

Call our Clinical team at **833-405-9086** Monday through Friday from 8 a.m. to 5 p.m. Central time.

** Availity, LLC is an independent company providing administration support services on behalf of Healthy Blue.*

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Complex Case Management program

Managing illness can be a daunting task for our members. It is not always easy to understand test results, know how to obtain essential resources for treatment, or know who to contact with questions and concerns.

Healthy Blue is available to offer assistance in these difficult moments with our Complex Care Management program. Our care managers are part of an interdisciplinary team of clinicians, including physical health and behavioral health, as well as other resource professionals there to support members, families, PCPs, and caregivers. The complex care management process uses the experience and expertise of the Care Coordination team to educate and empower our members by increasing self-management skills. The complex care management process can help members understand their illnesses and learn about care choices to ensure they have access to quality, efficient healthcare.

Members or caregivers can refer themselves or family members by calling the Customer Service number located on their ID card. They will be transferred to a team member based on the immediate need. Physicians can refer their patients by contacting us telephonically or through electronic means. We can help with transitions across levels of care so that patients and caregivers are better prepared and informed about healthcare decisions and goals.

You can contact us by email at SM_MODCMREF@healthybluemo.com, by phone at **833-388-1407**, or by completing a care management referral form [online](#). Case Management business hours are Monday through Friday from 8 a.m. to 5 p.m. Central time.

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