



August 2010

### Don't forget CAQH attestation

- The Blues will deny applications for new lines of business for professional providers who do not attest within 14 days of their application that the information reported on CAQH is current. You will then need to reapply with new enrollment forms.
- Current practitioners going through the recredentialing process have 60 days to complete and attest to CAQH. If you do not complete this step, you will need to reapply to all networks and meet all current credentialing criteria.

For more information, please see Page 13 of the July-August *BCN Provider News*.

### Woman's Choice updates

Updated Woman's Choice Referral and Clinical Review Guidelines are now available:

- At [ereferrals.bcbsm.com](http://ereferrals.bcbsm.com) on the Clinical Review & Criteria Charts page.
- Via a link on page 8-30 of the Care Management chapter in the *BCN Provider Manual*.

### Submit claims electronically

You can submit most claims electronically to BCN **except**: claims requiring hardcopy documentation, BCN tertiary claims, BCN status inquiry for secondary claims, Away from Home Care claims, COB when primary insurer has denied payment, and human organ transplants.

To sign up for electronic billing, call Electronic Data Interchange at 1-800-542-0945.

### Scheduling physicals

Blue Care Network does not restrict the timing between members' yearly physical examinations. Check-ups with a member's primary care physician (or with an obstetrician-gynecologist) are based on the physician's medical judgment and may occur more than once per year. For more information, please see Page 29 of the July-August *BCN*

### MSU coverage effective July 1

Michigan State University coverage began July 1 for MSU employees and retirees. MSU's self-funded plan is administered by BCN Service Company.

- PCPs must be in-network and should coordinate the member's care.
- Referrals and plan notification **are not required**, but some services require authorization (see the Blue Care Network 2010 Referral and Clinical Review Program on [ereferrals.bcbsm.com](http://ereferrals.bcbsm.com)).
- Plan offers two benefit levels: in-network and out-of-network.
- Member ID cards bear both MSU and BCN Service Company logos.
- Contract numbers begin with XYS.
- MSU Plan 65 is for employees and retirees whose primary coverage is Medicare.
- For more information, please see Page 3 of the July-August *BCN Provider News*.

### After-hours codes

- After-hours codes \*99050 and \*99051 are only payable to a member's primary care physician or the PCP on call when billed with evaluation and management codes \*99201-\*99215 and when the service is performed in the office location.
- After-hours codes are only reimbursable for the listed services when provided to BCN commercial members.

For more information on capitated and fee-for-service arrangements as well as BCN Advantage and BlueCaid claims, please see Page 41 of the July-August *BCN Provider News*.

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We'd like your input! Please take a minute to respond to our Provider Servicing Satisfaction Survey at <http://www.surveymonkey.com/s/bcnrep>. Thank you.

If you have questions or need assistance, please contact **(name)** Christina Healy-Caldwell  
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