



Happy Anniversary to Healthy Blue LivingSM — 5 years and going strong!

▶ Important Healthy Blue Living notes for 2012:

• Change in follow-up form requirement

Effective with Jan. 1, 2012 renewal dates, Blue Care Network will no longer require submission of a *Blue Care Network Qualification Form* for Healthy Blue Living and Healthy Blue Living RewardsSM **follow-up visits**. This change will occur as each employer group contract renews in 2012. BCN will inform members of any form requirements before their scheduled follow-ups.

• Paper forms going away

BCN will stop accepting paper *Blue Care Network Qualification Forms* for dates of service after March 31, 2012. In lieu of faxing or mailing paper forms, physicians will need to submit forms using the electronic Healthy Blue Living form submission tool, available on Health e-BlueSM. Sign up for Health e-Blue at MiBCN.com > *I am a provider*.

• Billing Healthy Blue Living exams

BCN requires you to use the V700 code when billing the initial or subsequent examinations if the exam does not address a specific condition. Do not use the V703 code.

For more information, please see Pages 3, 5 and 29 in the Jan.-Feb. 2012 *BCN Provider News*. Please contact your provider representative if you have questions.

U of M serving BCN Advantage members

BCN Advantage HMO-POSSM members can now receive care at University of Michigan hospitals and health centers and visit its physicians.

This affiliation gives BCN AdvantageSM members access to more than 2,000 U of M specialists and primary care physicians at 54 clinics and three hospitals — University Hospital, Von Voigtlander Women's Hospital and C.S. Mott Children's Hospital.

Woman's Choice changes for 2012

In the new Woman's Choice program effective Jan. 1, 2012, BCN HMOSM and BlueCaid members can see women's health specialists without a referral from the primary care physician. BCN HMO members can also see other identified specialists for specific professional services with a referral. The method of determining which services are covered for those members will differ based on the health care provider's specialty. For more information, including links to the *Woman's Choice specialty and procedure/diagnosis codes requirements* and *Woman's Choice Referral and Clinical Review Guidelines*, please see Page 5 of the Jan.-Feb. 2012 *BCN Provider News*.

Billing flu vaccine for BCNA

BCN-affiliated providers should not bill flu vaccines for BCN Advantage HMO-POSSM members using CPT code *90658. Please see Page 29 of the Jan.-Feb. 2012 *BCN Provider News* for more information and a list of recommended codes.

Referrals for OT services

When initiating referrals for occupational therapy, use code *97003 on the referral for the evaluation and *97535 when referring for occupational therapy treatment. For other therapy tips, go to ereferrals.bcbsm.com. Click on *Outpatient PT, OT, ST*, then click on *General e-referral therapy tips*.

* CPT codes, descriptions and two-digit modifiers only are copyright 2011 American Medical Association. All rights reserved.

▶ Designates information intended for primary care physicians only.



If you have questions or need assistance, please contact (name)

Phone:

E-mail: