

INSIDE **ipp**

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Blue plans and Lumeris complete acquisition of nation's largest real-time health care communication network

Three of the nation's leading Blue health plans, Highmark, Horizon Blue Cross Blue Shield of New Jersey (Horizon), and IBC, along with health IT provider Lumeris Corp., announced they have closed their transaction and finalized their arrangement to acquire NaviNet®. Terms of the acquisition were not disclosed.

"This new partnership is a great example of forward-thinking organizations working together to generate positive change, leverage the most modern technology, and activate the brightest minds in our industry," said Daniel J. Hilferty, president and CEO of IBC. "By acquiring NaviNet together, we are taking an important step towards transforming the delivery of health care in our country."

Through the new partnership, NaviNet will leverage its real-time communication network and Lumeris' accountable care delivery platform to drive the adoption of new accountable care models throughout the country. All over the nation, health plans, including Highmark, Horizon, and IBC, are developing new value-based payment models that reward physicians for highly coordinated, high-quality, more cost-effective care. The integration of NaviNet and Lumeris' capabilities will allow plans to develop next generation accountable care delivery systems to contain costs and improve quality, while continuing to handle administrative transactions easily and efficiently.

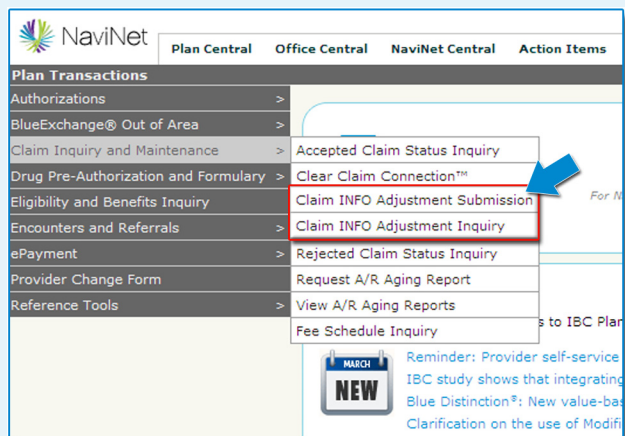
Provider access to the NaviNet web portal will remain unchanged, and the services, workflows, and transactions used to interact with health plans will be unaffected.

For more information, please read the IBC press release at www.ibx.com/press_release/navinet. ❖

Claim INFO Adjustment transactions reminder

Providers have access to two Claim INFO Adjustment transactions through the NaviNet® web portal:

- Claim INFO Adjustment Submission:**
 This transaction allows you to submit claims adjustments through NaviNet for claims that are in a paid or denied status. Claims data is available for up to two years prior to the current date.
- Claim INFO Adjustment Inquiry:**
 This transaction gives you the ability to review the status of submitted requests.



For step-by-step instructions on how to navigate through these two transactions, user guides are available in the Administrative Tools & Resources section on the IBC NaviNet Plan Central homepage. You can also contact NaviNet Customer Care at [1-888-482-8057](tel:1-888-482-8057) if you need additional assistance. ❖

Blue Distinction®

New value-based designation

Blue Distinction is a national designation program, developed in collaboration with the medical community to recognize those facilities that demonstrate expertise in delivering quality specialty care — safely, efficiently, and cost effectively. Blue Distinction Centers are a key part of Blue Plans' efforts to collaborate with physicians and facilities to improve the overall quality, and resulting affordability, of specialty care.

The Blue Distinction Centers for Specialty Care® program is evolving from a quality-focused designation to a more robust, value-based designation that will recognize those facilities that demonstrate expertise in delivering quality specialty care — safely, but also efficiently, and cost effectively.

The value-based designation is awarded to facilities that meet stringent quality measures, focused on patient safety and outcomes, as well as cost-of-care criteria, which will further differentiate Blue Distinction Centers from other facilities. This may result in a fewer number of facilities who are able to maintain their designation.

The Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield plans, is scoring the Requests For Information (RFI) that facilities recently submitted for the Blue Distinction Spine Surgery and Knee and Hip Replacement programs applying the value-based criteria. The other designations currently offered include Cardiac Care, Bariatric Surgery, Complex and Rare Cancers, and Transplants. Eligible facilities may apply during the RFI cycle, when offered, for a particular designation. For the next RFI cycle for these designations, the value-based criteria will be applied.

For those facilities that meet the quality metrics, new cost criteria have been added to address market demand for affordable health care amid significant cost variation for the specialty care areas addressed by Blue Distinction programs.

On a national level, Blue Plans are active in marketing Blue Distinction Centers to nearly 100 million members through national public relations, recognition in a National Provider Directory, and other promotional efforts.

For more information regarding the Blue Distinction Program, contact Phil Gehman at phil.gehman@ibx.com or [215-640-7694](tel:215-640-7694). ❖

Coming soon: New tool for members to provide online reviews of their network physicians

To help members make informed decisions when seeking care, IBC will launch a new online capability that allows all commercial and Medicare Advantage HMO and PPO members, including those who carry an Independence Administrators ID card, to post reviews and ratings for IBC network physicians from whom they've received care. This initiative comes from the Blue Cross and Blue Shield Association (BCBSA), an association of independent Blue Cross and Blue Shield plans, and applies to all Blue plans nationally.

This new tool will be available to members through our secure consumer website, ibxpress.com, or through MyIBXTPA.com for Independence Administrators members.

Physicians will be able to view their reviews through the provider finder tool, which is available at ibx.com by selecting *Find a Provider*. Reviews will also be displayed nationally on the Blue National Doctor & Hospital FinderSM at www.bcbs.com.

Members will be able to rate their network physicians in the following areas:

- **Experience:** Overall care provided by the physician.
- **Communication:** Willingness of physician to listen to their concerns.
- **Availability:** Ease and timeliness of obtaining an appointment.
- **Environment:** Friendliness of office staff.

Patient review is valuable

Not only is patient review a valuable tool that can provide you insight into your patients' experiences, but it can also attract new patients. While there are many factors to consider when patients choose a health care provider, online patient reviews are highly sought after pieces of information for consumers. And patient reviews are frequently positive – some providers have even used reviews as a means to promote their practice.

Once the tool is available, we encourage you to tell your patients so they can contribute to your reviews.



Moderation of reviews

It is important to note that a rigorous process will be in place to authenticate, verify, and moderate member reviews prior to them appearing on the provider finder tool, a process that will help ensure that only authenticated members who attest that they have seen the physician can contribute reviews. In addition, all reviews are checked for appropriateness of language and content.

Look for more information about this valuable new tool in future editions of *Partners in Health UpdateSM* and *Inside IPP*. ❖

Additional resources

For BlueCard® facility claims, call **1-800-ASK-BLUE**.

For questions about BlueCard eligibility, call the BlueCard Eligibility® line at **1-800-676-BLUE**.

Inside IPP is a publication of Independence Blue Cross and its affiliates (IBC). Suggestions are welcome.

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The Blue Cross and Blue Shield names and symbols and all BlueCard terms are registered marks of the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield plans.

Independence Blue Cross offers products directly, through its subsidiaries Keystone Health Plan East and QCC Insurance Company, and with Highmark Blue Shield — independent licensees of the Blue Cross and Blue Shield Association.



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Roles and responsibilities related to the BlueCard® Program

What are the roles and responsibilities of the Host (or local) Blue Cross and/or Blue Shield Plan to you, the local provider?

IBC, as your local Blue Cross and/or Blue Shield Plan, has roles and responsibilities that include provider-related functions such as:

- being the single contact for all claims payment, customer service issues, provider education, adjustments, and appeals;
- pricing claims and applying pricing and reimbursement rules consistent with provider contractual agreements;
- forwarding all clean claims received to the member's Blue Cross and Blue Shield Plan to adjudicate based on eligibility and contractual benefits;
- conducting appropriate provider reviews and/or audits;
- confirming that providers are performing services and filing claims appropriately within their scope of practice and according to their local Blue Cross and/or Blue Shield Plan;
- conducting HIPAA-standard transactions;
- training for providers on BlueCard.

What are the roles and responsibilities of the member's Home Plan to you, the local provider?

The member's Home Plan has responsibilities that include functions such as the following:

- adjudicate claims based on member eligibility and contractual benefits;
- respond to prior authorization and precertification requests/inquiries;
- request medical records through the Host Plan when review for medical necessity, determination of a pre-existing condition, or high-cost/utilization is required.

What are the roles and responsibilities for the local provider?

You, the local provider, have the following responsibilities:

- obtaining benefits and eligibility information, including covered services, copayments, and deductible requirements;
- filing claims with the correct Host Plan and including, at minimum, the required elements to ensure timely and correct processing, such as:
 - current member ID card number;
 - all Other Party Liability information;
 - all member payments (i.e., copayments, coinsurance, or deductibles);
- submitting medical records in a timely manner when requested by the Host or Home Plan. ❖

