

# BlueNews<sup>SM</sup> for Providers



BlueCross BlueShield of South Carolina and  
BlueChoice<sup>®</sup> HealthPlan of South Carolina

New Medical Policies  
Latest Medical Policy Updates  
Peer-to-Peer Discussions  
New BlueChoice HealthPlan Website

Referrals for Members  
Precertification Ease  
Provider Education FAQs  
Contact Provider Relations

## The Health of America

Blue Cross Blue Shield Claims Data Show  
Major Depression Rates Are On The Rise



The 20th installment of the Blue Cross Blue Shield Health of America Report<sup>®</sup> series, titled “Major Depression: The Impact on Overall Health,” shows that major depression diagnoses surged, especially among adolescents and millennials, from 2013 through 2016.

The report, which is based on medical claims data from the Blue Cross Blue Shield Health Index<sup>SM</sup>, illustrates that major depression diagnoses are linked to other chronic health

conditions. In fact, it shows that 85 percent of people who are diagnosed with major depression also have one or more serious chronic health conditions, and nearly 30 percent of those have four or more other health conditions.

The report also shows that:

- Major depression has a diagnosis rate of 4.4 percent for Blue Cross members – with diagnosis rates rising by 33 percent from 2013 through 2016 and climbing fastest among adolescents (up 63 percent) and millennials (up 47 percent).
- Diagnosis rates vary by as much as 300 percent by state and more than 400 percent by city.
- Women are diagnosed with major depression at double the rate of men – 6 percent and 3 percent, respectively.
- Those diagnosed with major depression are nearly 30 percent less healthy on average than those not diagnosed with major depression.
- Those diagnosed with major depression use health care services more than those without a depression diagnosis, resulting in two times the health care spending – about \$10,673 compared to \$4,283.

According to Trent Haywood, senior vice president and chief medical officer at the Blue Cross and Blue Shield Association, “Major depression diagnoses are growing quickly, especially for adolescents and millennials, and the high rates for adolescents and millennials could have a substantial health impact for decades to come.

“Further education and research are needed to identify methods for both physicians and patients to effectively treat major depression and begin a path to recovery and better overall health.”

**Read the report in its entirety** and view the **entire catalog of Health of America reports**.

## Did You Know?

The BlueCross BlueShield of South Carolina and BlueChoice® websites include a page dedicated to laboratory medical benefits. The laboratory medical benefits page allows you to quickly access information about the Laboratory Benefits Management Program. You can find the list of in-network independent labs, the latest prior authorization list, the Laboratory Reconsideration Form, frequently asked questions and presentations.

We've also provided a summary of common laboratory tests and the corresponding medical policies. The Laboratory Summary: Common Medical Policy Edits provides an overview of the most common labs and the medical necessity criteria and policy rules criteria used to determine coverage.

Select Laboratory Medical Benefits from the Providers page of [www.SouthCarolinaBlues.com](http://www.SouthCarolinaBlues.com) or [www.BlueChoiceSC.com](http://www.BlueChoiceSC.com) to get started.



## New Medical Policies

### Pancreatic Enzyme Testing for Acute Pancreatitis

Effective Aug. 1, 2018, BlueCross and BlueChoice® implemented a new medical policy addressing the use of pancreatic enzymes to monitor the health of pancreatic tissue. The policy, **CAM 198 — Pancreatic Enzyme Testing for Acute Pancreatitis**, has been published on the Medical Policies pages of the BlueCross and BlueChoice websites.

### Cardiac Biomarkers for Myocardial Infarction

Effective Aug. 13, 2018, BlueCross and BlueChoice implemented a new medical policy addressing the measurement of cardiac biomarkers for diagnosing myocardial infarction in patients presenting with symptoms of acute coronary syndrome (ACS). The policy, **CAM 193 — Cardiac Biomarkers for Myocardial Infarction**, has been published on the Medical Policies pages of the BlueCross and BlueChoice websites.

More information about these new policies is outlined in news bulletins posted on [www.SouthCarolinaBlues.com](http://www.SouthCarolinaBlues.com) and [www.BlueChoiceSC.com](http://www.BlueChoiceSC.com).

## Latest Medical Policy Updates Available in Bulletins

We frequently revise the medical policies we use to make clinical determinations for a member's coverage. Medical policies that have been recently reviewed, updated or newly added are listed in a provider news bulletin, available on the Provider News pages of [www.SouthCarolinaBlues.com](http://www.SouthCarolinaBlues.com) and [www.BlueChoiceSC.com](http://www.BlueChoiceSC.com). Each policy listed in the bulletin includes a summary of the recent updates. Providers can visit the medical policies and clinical guidelines pages of [www.SouthCarolinaBlues.com](http://www.SouthCarolinaBlues.com) and [www.BlueChoiceSC.com](http://www.BlueChoiceSC.com) to read any medical policy in its entirety.



## Peer-to-Peer Discussions

We've streamlined the peer-to-peer discussion process. Peer-to-peer discussions are offered for services that receive an adverse decision due to medical necessity.

Authorization denial letters now include directions for providers to initiate peer-to-peer discussions. Additionally, the peer-to-peer discussion request form has been improved and is available at [www.SouthCarolinaBlues.com/Providers/Forms/Specialtiesother.aspx](http://www.SouthCarolinaBlues.com/Providers/Forms/Specialtiesother.aspx).

To initiate a request, complete the form in its entirety and submit with supporting documentation. The form can be submitted by email to [Peer.Medical@bcbsc.com](mailto:Peer.Medical@bcbsc.com) or by fax to **803-264-9175**. Incomplete forms will not be considered for clinical review.

Reviews for pharmacy drugs are conducted by CVS/caremark. CVS/caremark is an independent company that provides prior authorization services on behalf of BlueCross. Call CVS/caremark at **800-294-5979**.

Upon receipt of the completed form and additional documentation, two attempts will be made to contact the provider.

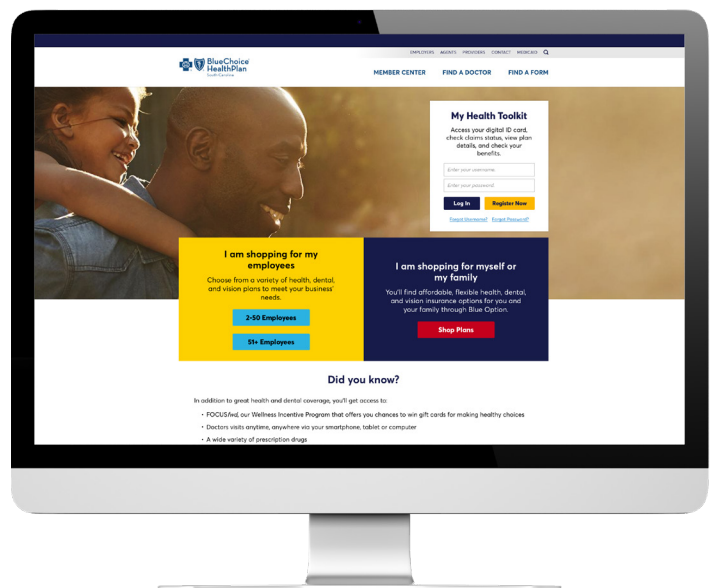
## www.BlueChoiceSC.com Has a New Look

The BlueChoice website has been transformed! Earlier this summer, the BlueChoice website was redesigned to improve functionality and the user experience.

Forms, medical policies, news bulletins, BlueNews, the Provider Education Advocates listing and the Provider Advocate Training Request Form can now be accessed directly from the Providers home page. The educational materials and reference guides you need are now categorized within the Education Center:

- Provider Self-Service Tools and Payment Resources
- Precertification
- Specialty Drugs and Pharmacy Drugs
- Clinical, Quality and Patient Resources
- Manuals and User Guides
- Laboratory Benefits Management
- Provider Training and FAQs

Explore the enhanced website today.





# Referrals for BlueChoice Members

BlueChoice health maintenance organization (HMO) members must have a referral from their assigned primary care physician before visiting a specialist. The primary care physician is responsible for notifying our Health Care Services department before sending the member to the specialist.

The best way to make referrals to specialists is through our website at [www.BlueChoiceSC.com](http://www.BlueChoiceSC.com). Referrals are immediately assigned an authorization number. Just follow these steps:

1. Go to [www.BlueChoiceSC.com](http://www.BlueChoiceSC.com).
2. Select Providers from the main menu.
3. Under My Insurance Manager<sup>SM</sup>, select Log In.
4. Enter your username and password (or select Create New Profile if this is your first visit to our website).
5. Select Authorization/Pre-Certification/Referral.

Enter the member's identification number and date of birth. You will also need to know the specialist's last name and specialty type. Once the referral is complete, print a copy of the confirmation and fax it to the specialist's office.

If your office does not have access to the internet, you can use the Referral Partner Authorization form instead. Once the form is completed, the primary care physician's office should fax a copy to BlueChoice and the specialist's office the same day you make the referral.

Referrals made by the primary care physician only include office visits and office-based procedures that do not require prior authorization. Referrals do not include approval for procedures/services that require separate authorization.

You cannot use web referrals or the Referral Partner Authorization form to request authorization for these services:

- Referrals to non-contracting specialists
- Referrals for routine vision care
- Referrals for mental health and substance abuse services
- Durable medical equipment and home care services
- Referrals with diagnoses of obesity, infertility, impotence or for cosmetic surgery (or any other possible contract exclusions)
- Inpatient or outpatient facility services
- Other procedures or services that require prior authorization

If you would like to request any of these services, please contact our Health Care Services department at [800-950-5387](tel:800-950-5387) to get prior authorization.

Primary care physicians and specialists can request specialist referral extensions on the web. The Authorization/Pre-Certification/Referral screen in My Insurance Manager includes an option through the Request Extension button, or providers can use the Check Status button. Only approved office visit referrals are available for extensions (CPT 99201-99255), and specialists can only extend their own referrals.



## Other Important Information

- Referrals are valid for six months.
- If it has been longer than six months, the specialist must contact the primary care physician for a new referral.
- We do not accept retroactive requests for referrals.
- Specialists are responsible for making certain they have valid referrals before seeing members.
- Use the web to ensure BlueChoice has received the referral.



## Precertification Has Never Been Easier

The Medical Forms Resource Center (MFRC) makes initiating precertification (prior authorization) requests easy.

The MFRC is a web-based tool created to allow you to electronically submit your precertification requests for some services. The system is fast, secure and accurate. It also cuts down on follow-up calls, as all the required information is outlined on the form. It's a perfect alternative to faxing requests or using My Insurance Manager for precertification requests for services that pend approval.

Take a look at some of its features:

- Information is transmitted to our private network through a server that has the highest security certificate available for secure communications.
- The electronic format ensures we receive your data and that it is clearly legible, eliminating the need for faxes that don't transmit or print properly.
- Requests submitted using the MFRC receive priority processing.
- MFRC can be used for BlueCross or BlueChoice members.
- You can use My Insurance Manager to check the status of your request.

Many services and procedures are available, and more forms will be created.

### MFRC Spotlight

Do you provide maternity care? Are you an oncologist or hematologist? The MFRC includes options to submit chemotherapy and maternity notifications.

Do you prescribe or supply durable medical equipment (DME)? The MFRC has several forms dedicated specifically to frequently prescribed DME, including:

- Continuous glucose monitoring
- Insulin pump
- Lymphedema pump
- Neuromuscular stimulator
- Orthotics
- Prosthetics
- Wound vac

If you need to request precertification for a DME item that isn't listed, you can use the miscellaneous option.

Access the MFRC from our websites, [www.SouthCarolinaBlues.com](http://www.SouthCarolinaBlues.com) and [www.BlueChoiceSC.com](http://www.BlueChoiceSC.com), or by visiting [www.formsresource.center](http://www.formsresource.center). Do you need assistance using MFRC? The Medical Forms Resource Center User Guide is available on our websites. You can also request training or a live demonstration by contacting Provider Relations and Education using the [Provider Advocate Training Request Form](#).








## Provider Education FAQs

Each month, we include a list of frequently asked questions submitted to [Provider.Education@bcbsc.com](mailto:Provider.Education@bcbsc.com). If you have a question, please email us, submit your question using the [Provider Education Contact Form](#) or call us at **803-264-4730**.

Frequently Asked Question	Our Response
Why does the status within the MD Checkup feature on My Insurance Manager say “Pending Approval”?	“Pending Approval” indicates a change has been made to the group that requires review and approval from BlueCross’ Provider Certification area. Once the review is complete, the status for the location will return to “Requires Verification.”
How often do I need to validate my group’s information within the MD Checkup feature on My Insurance Manager?	The Provider Validation reminder will display quarterly, as necessary, when any location requires validation.
How can I learn more about the MD Checkup features?	We now have the “Provider Validation: MD Checkup User Guide” on our website at <a href="http://www.SouthCarolinaBlues.com">www.SouthCarolinaBlues.com</a> . Just navigate to the “Provider” section, click on “Education Center” and then “Resources.” If you need help locating the guide, or if you still have questions after reviewing it, please email <a href="mailto:Provider.Education@bcbsc.com">Provider.Education@bcbsc.com</a> .
I would like to request an education visit from a provider advocate. Is there a form I need to complete?	We ask that you complete our “Provider Advocate Training Request Form,” which will help our Provider Advocates know your specific needs when they visit your office. The form can be found on our website at <a href="http://www.SouthCarolinaBlues.com">www.SouthCarolinaBlues.com</a> . Please email <a href="mailto:Provider.Education@bcbsc.com">Provider.Education@bcbsc.com</a> if you need help locating the form.
I have additional questions about a refund request we received. Whom do I contact to get the information?	Please contact Provider Services via the “Ask Provider Services” feature on My Insurance Manager. You can contact a representative through the Message Center or STATchat.



## Need to Get in Touch With Provider Relations and Education?

Provider advocates are always eager to assist you. If you have a training request, please contact your county's designated provider advocate by using the [Provider Advocate Training Request Form](#). For questions about an ongoing education initiative or a recent news bulletin, submit the [Provider Education Contact Form](#). These forms are located on the "Contact Us" page of our provider websites. You can also reach our Provider Education department by emailing [Provider.Education@bcbssc.com](mailto:Provider.Education@bcbssc.com) or by calling **803-264-4730**.



BlueCross BlueShield of South Carolina and  
BlueChoice® HealthPlan of South Carolina

Independent licensees of the Blue Cross and Blue Shield Association

*Benefits Disclaimer: The information listed is general information and does not guarantee payment. Benefits are always subject to the terms and limitations of specific plans. No employee of BlueCross BlueShield of South Carolina or BlueChoice HealthPlan of South Carolina has authority to enlarge or expand the terms of the plan. The availability of benefits depends on the patient's coverage and the existence of a contract for plan benefits as of the date of service. A loss of coverage, as well as contract termination, can occur automatically under certain circumstances. There will be no benefits available if such circumstances occur.*

*Publication Disclaimer: For educational and research purposes only. While the articles in this publication are derived from sources believed reliable, it is not intended to be professional health care advice. Every effort has been made to ensure that the information in this editorial was correct. We do not assume and hereby disclaim any liability for loss caused by errors or omissions in preparation and editing of this publication.*