AAHAM Aksarben Meeting 2024 Fall



Mission and Values



Meare a champion for the health and well-being of our members and the communities we serve.

MISSION AND VALUES

MISSION

We are a champion for the health and well-being of our members and the communities we serve.

VALUES



PEOPLE MATTER

Our work impacts people's lives. It's an honor to serve each other, our customers and the community.



DO THE RIGHT THING FOR THE RIGHT REASONS

How we do our work matters. We make decisions that are in the long-term best interests of our customers and organization.



ONE TEAM

We work as One Team to deliver for our customers and partners. We respect and celebrate diverse perspectives and opinions. Fun provides the energy for success!



EMBRACE CHANGE

We embrace change with a spirit of possibility, curiosity and adaptability. We lead the market because we anticipate our customers' needs.



DEFAULT TO ACTION

We value action and decision making over delay. We are willing to take strategic risks and try new things. We collaborate and move forward with our customers' needs in mind.



LEADERSHIP AND OWNERSHIP PERSPECTIVE

Everyone is expected to be a leader and take ownership of their work as well as our mission. We are ALL empowered to take initiative and make decisions that serve our customers.

Meet the Team



MEET THE TEAM



JENNIFER DREW

Providers, Specialties and Dentists:

ZIP codes starting with 688, 689,
690, 691, 692, and 693



Providers and Specialties:

Bryan Health, Bryan Health
Connect, CHI Health and UniNet



KATHERINE VRBKA

Providers, Specialties and Dentists:

ZIP codes starting with 684, 685,
686, 687 and Veteran's

Administration



Providers and Specialties:
Madonna, Methodist, Methodist
Health Partners, Nebraska Medicine
and Nebraska Health Partners



TAWNY ARCHER

Providers, Specialties and Dentists:

ZIP codes starting with 680, 681,
683, Boys Town, Children's
Nebraska and Secure Care

Medicare Advantage



Utilization Management

Providers will be able to submit Medicare Advantage (MA) preauthorizations via NaviNet[®]. These authorizations can be tracked in the same way as our commercial members' preauthorizations.

Claims Processing

Blue Cross and Blue Shield of Nebraska (BCBSNE) will process MA claims directly. You can expect the claims process for MA to mirror our familiar commercial claims process.

NaviNet Access

Providers will have access to claims, eligibility, benefits, preauthorizations and other items available on NaviNet for DOS Jan. 1, 2025 and after for the MA line of business. Self-service via NaviNet is preferred.

Enhanced Customer Service Experience

BCBSNE will have a Nebraska-based customer service team available to answer MA questions once the transition is complete. **NOTE**: The customer service phone number for MA will not change. Please continue to self-serve first.

BCBSNE Auto Approval for Skilled Nursing Facility Admissions

Beginning Jan. 1, 2025, BCBSNE will waive authorizations the first seven days in a Skilled Nursing Facility (SNF) for all MA PAR providers.

- Notification of Admission is required within 72 hours of admission.
- Concurrent authorization review is required to certify additional days, thus allowing us to issue the Notice of Medicare Non-Coverage timely to the facility and the member.
- If a SNF admission goes beyond seven days; authorization will be required on day eight and after.

Join Us at one of our in-person Medicare Advantage Provider Forums



MA Provider Lunch & Learn – Sept. 27, 11:30AM-1PM



MA Provider Learn a
Latte – Oct. 1, 3:305PM

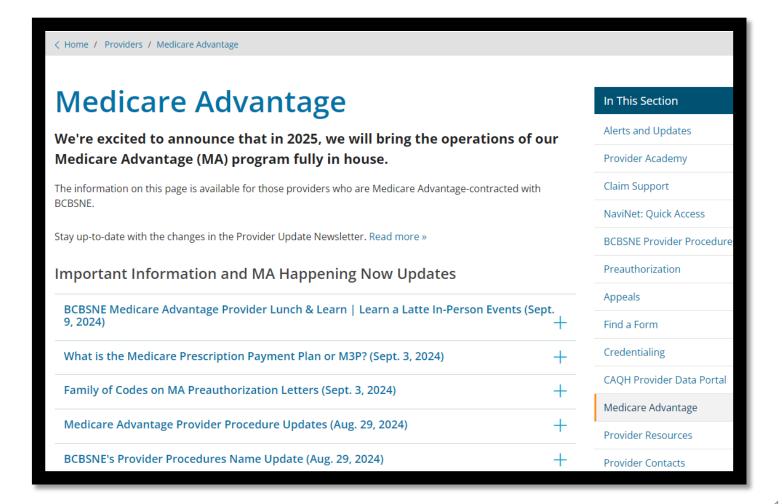


MA Provider Learn a
Latte – Oct. 9, 7:309AM

BCBSNE Medicare Advantage Resources

Access a variety of information on the BCBSNE Provider MA site including:

- Updates
- Communications
- Procedure manual



Networks



NEtwork Blue



NEtwork BLUE

NEtwork BLUE is our statewide network made up of 98% of Nebraska's doctors and non-governmental acute care hospitals.*

NEtwork BLUE provides access to:

- · Hospitals and clinics across Nebraska
- Primary and specialty care providers
- Heart, cancer and trauma centers
- Children's care
- Behavioral health network

^{*} Source: BCBSNE statistics. June 27, 2023

Blueprint Health



Blueprint Health

Our Blueprint Health network features CHI Health and other providers and facilities in Nebraska and contiguous counties in Iowa. This regional network is available to groups headquartered in Omaha, Lincoln and the surrounding communities in ZIP codes starting with 680, 681, 683, 684 and 685, as well as Adams, Buffalo, Hall, Kearney and Phelps counties. All other Nebraska providers are out of network.

Some of the key hospitals and health care providers include:

- CHI Health
- Creighton University System
- Nebraska Spine Hospital LLC
- Boys Town National Research Hospital

Premier Select BlueChoice



The Premier Select BlueChoice network features Nebraska Methodist Hospital System, Nebraska Medicine and Bryan Health. This regional network is available to employees residing in Omaha, Lincoln and surrounding communities in ZIP codes starting with 680, 681, 683, 684, 685, Adams county in central Nebraska and contiguous counties in Iowa.

NaviNet®



Third-Party Registration



AM I REQUIRED TO USE NAVINET AS A THIRD-PARTY VENDOR?

Yes, all in-network providers, as well as the vendors supporting them, are required to use NaviNet for claims, benefits and other questions.



WHAT IF I WORK AS A VENDOR FOR A PROVIDER OFFICE AND/OR FACILITY? OR HOW DO I GET MY THIRD-PARTY VENDOR REGISTERED?

Visit the NantHealth Center to register as a third-party with NaviNet and follow the steps on the page.

Visit our Provider
Academy page under
NaviNet FAQs for Link.



AS A VENDOR DO I HAVE TO COMPLETE A FORM ON NAVINET?

All third-party vendors need to complete the Authorization form to register with NaviNet or to add tax IDs or health Plans.



Provider Academy

You will find the below information and links under our Provider FAQ's page under the first section called NaviNet FAQs

What if I work as a vendor for a provider office and/or facility?

Visit the NantHealth Help Center to register as a third party with NaviNet. Ind follow the steps on the page.

Eligibility and Benefits

Please visit our eLearning page on Provider Academy for a video on step-by-step instructions on Eligibility and Benefits.

NebraskaBlue.com/Providers/Provider-Academy/eLearning

Benefit and Eligibility



BCBSNE MEMBERS

Member ID

Is optional unless the member has two polices with BCBS.

ID Cards

Copies of ID Cards are in NaviNet. Under Insurance Detail.

Schedule of Benefits Summary Is also located under Insurance Detail.

Medical and Dental is available.

Dental is on the bottom if members have both Medical and Dental.

If member's policy is terminated the Schedule of Benefits Summary will not open.

INSURANCE DETAILS

BLUECARD MEMBERS

Member ID

Is required to search in NaviNet.

We receive limited data directly from the member's home plan regarding their eligibility and benefits.

For detailed eligibility and Benefits you can call the member's home plan directly with the number on the back of their ID card or BlueCard Line at 1-800-676-2583

ID Cards

Copies of ID Cards are not loaded in NaviNet as they are not our members.

Schedule of Benefits Summary

Schedule of Benefits Summary are not loaded in NaviNet as they are not our members.

Enhanced Claim Denials

- Please visit our eLearning page on Provider Academy for a video on Enhanced Claim Denials.
- NebraskaBlue.com/Providers/Provider-Academy/eLearning

Enhanced Claim Denials

Updated Feb. 13, 2024



MPROVED DENIALS

- This service is considered inclusive to another service.
- · Duplicate Claim or Service.
- This service is included in the payment for a related procedure.
- This service is not allowed in full when performed in conjunction with related services.
- Provider exceeded the maximum number of billable units for these services per day.
- The procedure code/bill type is inconsistent with the place of service.
- These services/diagnoses are not covered due to a plan or policy exclusion.

IMPROVED DENIALS – OUT OF AREA MEMBERS

- Expenses incurred after coverage termination.
- These charges are not covered. Services are subject to prior approval under the member's benefit plan or policy.
- · Patient not enrolled at time of services.
- The procedure is not covered because the patient's contract contains a specific exclusion for the condition/services reported.
- This is a Medicare Advantage type claim. Medicare charge limitations may apply.

Claim Appeals



APPEAL

- Denied Not Medically Necessary
- Denied Experimental or Investigative
- Denied No Preauthorization Obtained
- Contract Exclusion or Duplicate Service
- High Dollar Prepayment Review
- Cosmetic
- Fertility
- Routine vs Medical
- Assistant Surgeon



RECONSIDERATION

- Manufacturers Invoice for Pricing
- Other Insurance Information Coordination of Benefits (COB)
- Coordination of Benefits (COB)
 Timely Filing Disputes
- Billing or Coding Dispute with Medical Rationale
- Copy of Medical Records
- Subrogation or Workers' Compensations
- Subrogation or Workers'
 Compensations Timely Filing
 Disputes



TIMELY FILING FORM

- Member ID card was not obtained
- Total Obstetrical (OB) care
- BCBSNE Processing Timely Filing Disputes

Communications and Resources

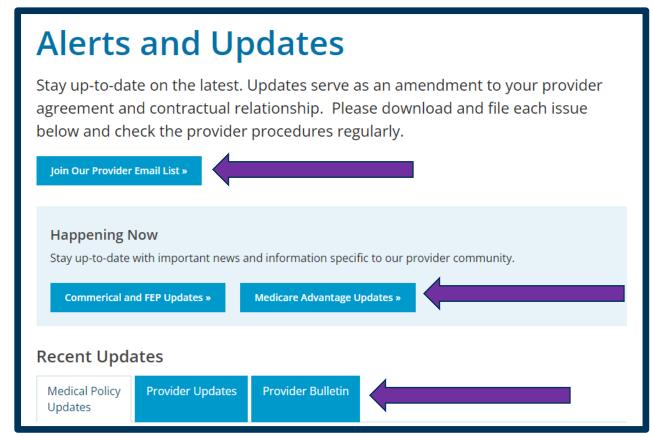


Alerts and Updates – Happening Now

Monthly Email Bulletin

Bimonthly Update Newsletter

Provider Academy eLearning FAQs Webinars



Provider Academy

Provider Academy

The Provider Academy includes a **library of supplemental resources** to help you maximize your experience as a participating provider with Blue Cross and Blue Shield of Nebraska. Visit often to see what is Happening Now, view our eLearning videos, find answers to our frequently asked questions, and more.

☑ Launch NaviNet

Happening Now

Alerts and Updates



eLearning

Digital content to help our providers navigate our tools.



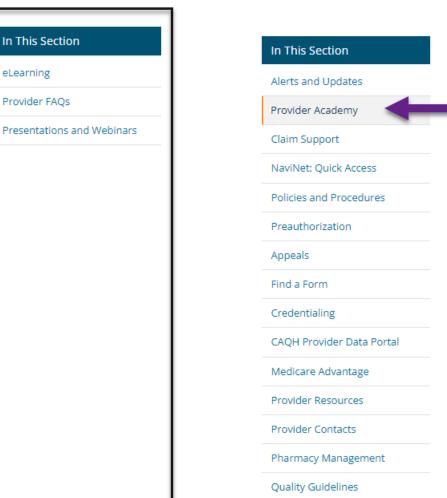
Provider FAQs

Find answers to the questions about claims and NaviNet[®].



Presentations and Webinars

Watch pre-recorded webinars and presentations.



eLearning

NEW <u>ELEARNING VIDEOS</u> FOR NAVINET ENHANCEMENTS

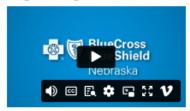
eLearning

To help our providers navigate our tools, please see the videos below.

CAQH Provider Data Portal



Registering for NaviNet®



Fee Schedules



Remits in NaviNet



Claim Appeal in NaviNet



Claims Investigation in NaviNet



Enhanced Claim Denials
Updated Feb. 13, 2024



NaviNet Tips and Tricks

Provider FAQs

Provider FAQs

Below you'll find answers to the questions we get asked the most.

NaviNet[®] FAQs

How do I know what my claim denied is inclusive to? (Feb. 15, 2024)	+
Why is there not a claim number on my duplicate denial? (Feb. 15, 2024)	+
Will the denial messages in NaviNet be on the remit or on my 835s? (Feb. 15, 2024)	+
What claims will I be able to view enhanced denial messages for in NaviNet? (Feb. 15, 20)24) +
What date did the claim denial enhancement take effect? (Feb. 15, 2024)	+
I have reviewed the denial detail in NaviNet but I still have questions. What should I do (Feb. 15, 2024)	now?
Registering for NaviNet	+
Accessing Fee Schedules	+
Am I required to use NaviNet as a third-Party vendor?	+
Check Claims Status Help Guide	+
Where can I see specific claim denial information in NaviNet?	+
How can I check on the status of my NaviNet registration?	+
How long does it take to get access to NaviNet?	+

In This Section

eLearning

Provider FAQs

Presentations and Webinars

Presentations and Webinars

Presentations and Webinars

Throughout the year the provider team hosts various events and webinars for health care professionals. See a previous presentation below.



Why MedA Presentation



2024 AAHAM Spring Presentation



In This Section

eLearning

Provider FAQs

Presentations and Webinars

Provider Webinar Fall 2023



AAHAM Fall Presentation



Preauthorization tool training

How to Contact Our Team

FOR QUESTIONS:

Step One: Navinet

• Please access NaviNet Sign In

Step Two: Claims Investigation

- Use the claims investigation tool located in NaviNet at the claim level
- Video Help Guide: <u>Eligibility & Claims Information for Providers</u> <u>Claims Investigation Help Guide</u>

Step Three: Escalating

- For claim escalations that you are unable to resolve through Navinet and/or Customer Service, please send an email request with details to: ProviderExecs@NebraskaBlue.com Inquiry must include
 - Why NaviNet or Claims Investigation was not successful
 - o The inquiry number from Customer Service and the Claims Investigation reference
 - o Detailed claim information member ID, BCBSNE claim number, billed amount, NPI, TIN