

November 2018 Anthem Indiana Network eUpdate

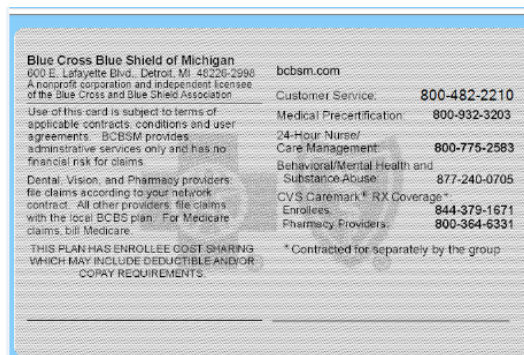
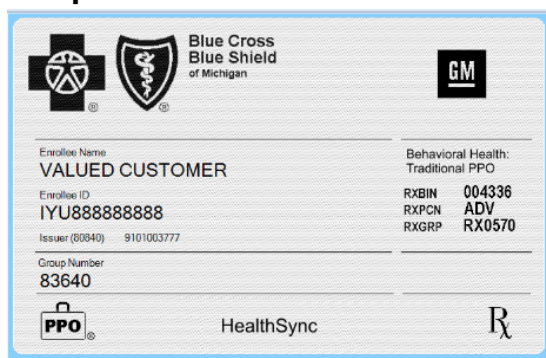
GM Salaried Employees: New Alpha Prefix accessing the Anthem HealthSync Network effective 1/1/2019	1
Anthem taps Paul Marchetti to lead company’s overall care transformation strategy	2
Reminder: Correspondence must include a valid Anthem member ID number	2
Availity: New report for oncology practices	2
Update to Durable Medical Equipment - effective October 14, 2018	4

November 2018 Anthem Indiana Network eUpdate

GM Salaried Employees: New Alpha Prefix accessing the Anthem HealthSync Network effective 1/1/2019

General Motors (GM) salaried employees living in Allen, Kosciusko, Miami and Wells County may have a health care plan which accesses the new Anthem HealthSync network. These members will have member identification cards issued by Blue Cross Blue Shield of Michigan with an alpha prefix of "IYU" and include the network name "HealthSync" on the front of the card.

Sample Identification Card



SUMMARY OF BENEFITS: Services Rendered in Indiana

Level 1: In-Network (HealthSync Participating Provider in Indiana)		Level 2: Out-of-Network (Provider NOT Participating in HealthSync in Indiana)	
Annual Deductible (In-Network)	Employee Only = \$1,500 Two People = \$3,000 Three or More People = \$3,500	Annual Deductible (Out-of-Network)	Employee Only = \$3,000 Two People = \$6,000 Three or More People = \$7,000
Preventive Services (In-Network)	Covered at 100%, no member cost share	Preventive Services (Out-of-Network)	Covered at 70%/30% AFTER out-of-network deductible is met
Coinsurance Rx and Medical	10% for in-network services after in-network deductible is met	Coinsurance Rx and Medical	10% for in-network services after in-network deductible is met
Annual Out-of-Pocket Maximum (In-Network)	Employee Only = \$2,300 Two People = \$4,600 Three or More People = \$5,600	Annual Out-of-Pocket Maximum (Out-of-Network)	Employee Only = \$4,600 Two People = \$9,200 Three or More People = \$11,200

Mental Health and Substance Abuse Services use the National PPO (BlueCard PPO) Network for Level 1 benefits (90%/10% after the In-Network Deductible is met) in all states, including Indiana. Precertification/Prior Authorization for these services are managed by New Directions on behalf of BCBS of Michigan/General Motors.

NOTE: Medical services received within the state of Indiana must be provided by a provider participating in the Anthem HealthSync Network to be considered Level 1 (In-Network). Members traveling or living outside the state of Indiana may access the BlueCard PPO Network for In-Network (Level 1) Medical Benefits.

Anthem taps Paul Marchetti to lead company's overall care transformation strategy

We are pleased to share that **Paul Marchetti** has been named Senior Vice President, Network and Care Delivery Transformation for Anthem. Paul joined Anthem October 22 and will have responsibility for Anthem's overall care transformation strategy.

Paul is a respected leader who has more than 25 years of payer and provider experience in healthcare delivery systems, business operations, product development and population health, and technology solutions. Paul joins Anthem from New Century Health, a specialty care management company, where he served as Chief Growth Officer and led top-line revenue growth, strategic planning and execution and product development. Prior to his current role, Paul held leadership roles at Aetna, United HealthCare, Horizon Healthcare and Physicians Health Services.

Paul looks forward to meeting and engaging with our healthcare professionals and payers to evolve the healthcare system to one that is simpler, more accessible and more affordable for all Americans.

Reminder: Correspondence must include a valid Anthem member ID number

This is a reminder that any correspondence faxed to Anthem must include a valid Anthem member identification (ID) number. If available, please also include a copy of the member's ID card. Any missing information will delay its processing.

Recently, we have seen a high instance of providers faxing appeals to us without a valid Anthem member ID number.

Appeals that do not have a valid Anthem member ID number will be returned by fax to the sender advising that this information is needed before we handle your request.

Availity: New report for oncology practices

There is a new report available for oncology practices from Anthem via Availity. Using a unique predictive analytics model, the report scores chemotherapy patients at a practice with their risk for a potentially avoidable admission. The weekly report uses many variables to determine a patient's individual risk for being admitted to the hospital while in treatment. This tool can help an oncology practice to be aware of high risk patients, and plan interventions or resource utilization accordingly. The tool was piloted with five practices

November 2018 Anthem Indiana Network eUpdate

including community and academic oncology with positive feedback.

This report is accessible through the Availity portal as shown below. For questions about this report or about Anthem's Cancer Care Quality Program please email: cancer.quality@anthem.com.

Weekly practice-level report generated includes patients soon to begin or currently undergoing treatment, segmented into risk categories.

Patients Undergoing Chemotherapy - Risk for Potentially Avoidable Admissions									
Practice TIN:		XXXXXXXX							
Practice Name:		XXXXXXXX							
Practice State:		XX							
Report Date:		mm/dd/yyyy							
New	Name	DOB	Ordering MD	Cancer site	Stage	Regimen	Planned Treatment Start	Planned Treatment End	
HIGH RISK - ordered by planned treatment start date									
	Last, First	mm/dd/yyyy	Last, First	Lung	IV	Carboplatin and Etoposide (SCLC, First Line)	mm/dd/yyyy	mm/dd/yyyy	
*	Last, First	mm/dd/yyyy	Last, First	Colon	III	Fluorouracil, Leucovorin and Oxaliplatin (FOLFOX-6) (Stage III, Adjuvant)	mm/dd/yyyy	mm/dd/yyyy	
	Last, First	mm/dd/yyyy	Last, First	Breast	IIA	Zoladex (Goserelin Acetate) (3.6 mg Monthly) (Adjuvant) (W)	mm/dd/yyyy	mm/dd/yyyy	
MODERATE RISK - ordered by planned treatment start date									
	Last, First	mm/dd/yyyy	Last, First	Lung	IV	Carboplatin and Etoposide (SCLC, First Line)	mm/dd/yyyy	mm/dd/yyyy	
	Last, First	mm/dd/yyyy	Last, First	Colon	III	Fluorouracil, Leucovorin and Oxaliplatin (FOLFOX-6) (Stage III, Adjuvant)	mm/dd/yyyy	mm/dd/yyyy	
	Last, First	mm/dd/yyyy	Last, First	Breast	IIA	Zoladex (Goserelin Acetate) (3.6 mg Monthly) (Adjuvant) (W)	mm/dd/yyyy	mm/dd/yyyy	
LOW RISK - ordered by planned treatment start date									
*	Last, First	mm/dd/yyyy	Last, First	Lung	IV	Carboplatin and Etoposide (SCLC, First Line)	mm/dd/yyyy	mm/dd/yyyy	
	Last, First	mm/dd/yyyy	Last, First	Colon	III	Fluorouracil, Leucovorin and Oxaliplatin (FOLFOX-6) (Stage III, Adjuvant)	mm/dd/yyyy	mm/dd/yyyy	
	Last, First	mm/dd/yyyy	Last, First	Breast	IIA	Zoladex (Goserelin Acetate) (3.6 mg Monthly) (Adjuvant) (W)	mm/dd/yyyy	mm/dd/yyyy	

Location of Report in Availity:

1. Make sure user has Log In for Availity and access to the online reporting function.
2. Click MORE option (Tab up top)
3. Click PROVIDER ONLINE REPORTING
4. REPORT SEARCH, then Avoidable Admissions (Weekly), then TAX ID, then PICK DATE, then VIEW
5. Will pop up as a Excel

Jul 30, 2018 | 01:28:12 PM

Provider Online Reporting

Print Logout

Anthem BlueCross BlueShield

Home

Programs

Report Search

Contact Us

Notifications

Register / Maintain Organization

Maintain User

- Register User(s)
- Edit User(s)

Helpful Links

- Online Resources
- Download NCOA PCMH Recognition Attestation Form

Report Search

Add new drop down field (Select Report)

* Required

Program & State

* Select a Program: Cancer Care Quality Program State: CT

Search Criteria

* Tax ID: 200463116

1 Select Report

Select One

Quality (Quarterly)

Avoidable Admissions (Weekly)

* Indicates a Required Field

Drop down values :
Select One
Quality (Quarterly)
Avoidable Admissions (Weekly)

SEARCH

November 2018 Anthem Indiana Network eUpdate

Update to Durable Medical Equipment - effective October 14, 2018

Effective October 14, 2018, Anthem BCBS will enforce the requirement to bill the correct modifier and HCPCS for services utilized. Incorrect billing will be rejected and claims will be returned to the provider for correction and resubmittal.

Durable Medical Equipment (DME) may be purchased, rented or rented until the purchase price has been paid.

Correct billing will allow member benefits to be applied correctly to include benefit accumulations for a member's DME benefits.