

November 2018 Anthem Kentucky Network eUpdate

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Anthem streamlines member ID cards - Use Availity to verify members' cost shares and benefits at time of service

In the [June edition of our Network Update](#) provider newsletter, Anthem Blue Cross and Blue Shield announced the introduction of a streamlined member identification (ID) card coming July 1, 2018, to help reduce confusion about members' cost shares. The updated member ID cards maintain the current style, but **specific cost share information (such as copayments, deductibles and coinsurance) will be absent from cards.** In addition, there may be alpha prefix and other changes to members' ID cards, so please check members' ID cards carefully. The new simpler and easier to read ID cards are available to groups over time as they renew coverage with Anthem.

Use Availity and EDI to verify eligibility, members' cost shares and benefits at time of service

Since the cost share information will no longer display on many of our ID cards, we urge providers to access **Availity** (our secure Web-based provider tool) and the **EDI** (Electronic Data Interchange) to verify member benefits and eligibility to obtain the most up-to-date cost share information in order to collect the applicable deductibles and coinsurance amounts at the time of service as appropriate. If a member presents an older ID card with outdated benefits at the provider office, it can create confusion about the member's cost share.

As always, please request that a member enrolled in our health benefit plans present their most current ID cards at the time of service. When filing claims to Anthem, enter the member's ID numbers exactly as the numbers appear on the card - including the alpha prefix - to help speed claims processing and reimbursement.

As the streamlined ID cards are adopted over time, it will help reduce misunderstandings around cost shares since real-time information is readily available via Availity about members' benefits and cost shares. Additionally, members will be encouraged to learn more about their benefits through Anthem's digital and online tools. Members can retain their cards for as long as they remain in the same product plan, regardless of changes to cost share information.

Electronic ID cards

As a reminder, members can now view, download, email, and fax an electronic version of their member ID cards using the Anthem Anywhere mobile app. And because our electronic ID cards look just like our physical ID cards, members can show either an electronic or physical ID card when obtaining services.

For questions, contact the provider service number on the back of members' ID cards.

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Please note, this notice does NOT apply to National Accounts, the Federal Employee Program® (FEP), Medicaid or Medicare plans.

Kentucky Pathway Transition HMO

Effective January 1, 2019, Anthem will be expanding the offering of the Pathway Transition HMO into 17 Kentucky counties, primarily centered around Jefferson and Fayette counties. This individual product has a narrow provider network, so it is imperative that both Covered Individuals and Providers are aware of the network composition. Covered Individuals must be referred/admitted to Providers within the Pathway Transition HMO network. In the event a medically necessary service is not available within the network, the Provider must obtain prior approval from Anthem before rendering the service.

In the Louisville area, the network consists of University of Louisville Hospital, University of Louisville Physicians (ULP), Family Health Centers, plus ancillary and behavioral health providers.

In Hardin County, the network consists of Hardin Memorial Hospital and physicians.

In Carroll County, the network consists of Carroll County Memorial Hospital and physicians.

In Lexington and the surrounding area, the network consists of University of Kentucky Healthcare.

Please reference the Provider Directory for network updates.

2019 Pathway Transition HMO Counties: Bourbon, Bullitt, Carroll, Clark, Fayette, Hardin, Henry, Jefferson, Jessamine, Larue, Nelson, Oldham, Scott, Shelby, Spencer, Trimble, Woodford

If you have any questions about this product or network, please contact your Network Relations Consultant.

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

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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.

Claims filing update: Home Infusion Therapy and Medical Specialty Pharmacy

Starting February 1, 2019, Kentucky home infusion therapy and medical specialty pharmacy claims should be filed to **Anthem**, regardless of the date of service. The last day claims should be filed to Care Continuum is January 31, 2019.

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 including community and academic oncology with positive feedback.

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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	IIIc	Fluorouracil, Leucovorin and Oxaliplatin (FOLFOX-6) (Stage III, Adjuvant)	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	IIIc	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		Lung	IV	Carboplatin and Etoposide (SCLC, First Line)	mm/dd/yyyy	mm/dd/yyyy
	Last, First	mm/dd/yyyy		Colon	IIIc	Fluorouracil, Leucovorin and Oxaliplatin (FOLFOX-6) (Stage III, Adjuvant)	mm/dd/yyyy	mm/dd/yyyy
	Last, First	mm/dd/yyyy		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

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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.