

PROVIDER NEWS

January 2022

BlueCross BlueShield of Western New York partners with Amerigroup companies to administer certain services to Medicaid Managed Care (MMC) and Child Health Plus (CHPlus) members. Please note, this newsletter is specific to the MMC and CHPlus programs only.



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Amerigroup Partnership Plan, LLC provides management services for BlueCross BlueShield of Western New York's managed Medicaid. Amerigroup Partnership Plan, LLC brinda servicios administrativos para Medicaid administrado de BlueCross BlueShield of Western New York. Amerigroup Corporation, an independent company, administers utilization management services for BlueCross BlueShield of Western New York's managed Medicaid. Amerigroup Corporation, una compañía independiente, administra los servicios de administración de utilización para el programa administrado de Medicaid de BlueCross BlueShield of Western New York. Highmark Blue Cross Blue Shield of Western New York and BlueCross BlueShield of Western New York are trade names of Highmark Western and Northeastern New York Inc., an independent licensee of the Blue Cross Blue Shield Association. Highmark Blue Cross Blue Shield of Western New York y BlueCross BlueShield of Western New York son nombres comerciales de Highmark Western y Northeastern New York Inc., un licenciatario independiente de Blue Cross Blue Shield Association.



COVID-19 information from BlueCross BlueShield of Western New York

BlueCross BlueShield of Western New York is closely monitoring COVID-19 developments and how the novel coronavirus will impact our customers and provider partners. Our clinical team is actively monitoring external queries and reports from the Centers for Disease Control and Prevention (CDC) to help us determine what action is necessary on our part.

For additional information, reference the COVID-19 section of our [provider website](#).

NYWPEC-1553-20

2021 CAHPS Survey results

Consumer Assessment of Healthcare Providers and Systems (CAHPS®) is an annual standardized survey conducted between January and May to assess consumer experiences with their provider and health plan, received by a random sample of patients. We use the results to measure our performance against our goals and determine the effectiveness of actions implemented to improve.

2021 NCQA Health Plan Star Rating ★★★★☆☆			
Survey Measures	2021 Rate	2021 All Affiliates Child Medicaid Average	2020 NCQA Quality Compass® National Average (All LOB)
Getting Care			
Getting Needed Care Composite (% Always or Usually)	92.06%	86.49%	86.03%
Ease of Getting Needed Care (% Always or Usually)	94.60%	90.65%	91.23%
Ease of Seeing a Specialist (% Always or Usually)	89.52%	82.33%	79.77%
Getting Care Quickly Composite (% Always or Usually)	89.61%	87.66%	90.53%
Ease of Getting Urgent Care (% Always or Usually)	90.14%	91.59%	92.58%
Ease of Getting a Check-Up or Routine Care (% Always or Usually)	89.08%	83.73%	88.97%
Satisfaction with Plan Physicians			
Rating of Personal Doctor (% 9 or 10)	72.02%	77.46%	78.57%
Rating of Specialist Seen Most Often (% 9 or 10)	74.42%	74.27%	73.36%
Rating of All Healthcare (% 9 or 10)	66.80%	73.02%	71.92%
Coordination of Care (Always or Usually)	87.62%	85.25%	86.08%
Satisfaction with Plan Services			
Rating of Health Plan (% 9 or 10)	62.05%	70.06%	71.90%

Providers directly affect over half of the questions used for scoring. BlueCross BlueShield offers an online course for providers and office staff designed to teach how to improve communication skills, build patient trust and commitment, and expand your knowledge of the *CAHPS Survey*. The *Improving the Patient Experience* course is available at no cost and is eligible for one continuing medical education (CME) credit by the American Academy of Family Physicians. Providers can access the course [online](#).

CAHPS® is a registered trademark of the Agency for Healthcare Research and Quality (AHRQ).

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Submitting prior authorizations is getting easier

BlueCross BlueShield of Western New York (BlueCross BlueShield) is transitioning to Availity* Authorization

You may already be familiar with the Availity Authorization app because millions of providers are already using it for submitting prior authorization requests for other payers. BlueCross BlueShield is eager to make it available to our providers, too. In 2022, you can begin using the same authorization app you may use for other payers. We hope to make it easier than ever before to submit prior authorization requests to BlueCross BlueShield.

Current prior authorization tool (ICR) is still available

If you need to refer to an authorization that was previously submitted through the Interactive Care Reviewer (ICR) tool, you will still have access to that information. We've developed a pathway for you to access your ICR dashboard. You will simply follow the prompts provided through the Availity Authorization app.

Innovation in progress

While we grow the Availity Authorization app to provide you with BlueCross BlueShield-specific information, we've provided access to ICR for:

- Appeals.
- Behavioral health authorizations.
- FEP authorizations.
- Clinician administered drugs.

Notices in the Availity Authorization app will guide you through the process for accessing ICR for Alternate Authorization/Appeals functions.

* Availity, LLC is an independent company providing administrative support services on behalf of BlueCross BlueShield of Western New York.

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Training is available

If you aren't already familiar with the Availity Authorization app, training is available.

Date	Time (All training sessions are one hour)
Wednesday, January 5, 2022	11 a.m. ET/8 a.m. PT
Tuesday, January 11, 2022	3 p.m. ET/Noon PT
Thursday, January 20, 2022	Noon ET/9 a.m. PT
Tuesday, January 25, 2022	Noon ET/9 a.m. PT
Wednesday, January 26, 2022	3 p.m. ET/Noon PT

You can always log onto <https://availity.com> and view the webinar at your convenience. From *Help & Training*, select **Get Trained** to access the Availity Learning Center.

You can use **AvAuthRef** for a keyword search or select the **Session** tab to see all upcoming live webinars.

Now, give it a try!

Accessing the Availity Authorization app is easy. Just log onto <https://availity.com>, and the *Authorizations and Referrals* icon is on the home screen. You can also access the app through the *Patient Registration* tab by selecting **Authorizations and Referrals**.

If you have questions, please reach out to Availity at **800-282-4548**.

Policy Updates — Prior Authorization



Prior authorization updates for medications billed under the medical benefit

Effective for dates of service on and after March 1, 2022, the following medication codes billed on medical claims from current or new *Clinical Criteria* documents will require prior authorization.

<i>Clinical Criteria</i>		HCPCS or CPT® code(s)
ING-CC-0183	Sogroya®	J3590
ING-CC-0184	Danyelza®	J9348
ING-CC-0185	Oxlumo™	C9074, J0224
ING-CC-0186	Margenza™	J9353
ING-CC-0187	Breyanzi®	Q2054
ING-CC-0188	Imcivree™	J3490, J3590
ING-CC-0189	Amondys 45™	J1426
ING-CC-0190	Nulibry™	J3490, J3590, C9399

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<i>Clinical Criteria</i>	Drug	HCPCS or CPT® code(s)
ING-CC-0116	Belrapzo	J9036
ING-CC-0161	Sarclisa	J9227
ING-CC-0104	Khapzory	J0642

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Please note, inclusion of a National Drug Code on your medical claim is necessary and will help expedite claim processing.

Visit the [Clinical Criteria website](#) to search for the specific *Clinical Criteria* listed below.



The Behavioral Health Areas of Expertise Profile improves the referral process

The *Behavioral Health Areas of Expertise Profile (BHAEP)* is designed to highlight your behavioral health network providers' services, cultural preferences, race, languages spoken, and other specialties to our members through the enhancement of our online provider directory. The goal is to help our members find the right behavioral health provider to fit their unique needs.

Contracted Medicaid providers are asked to answer a brief online survey on their clinical areas of expertise, demographics, modalities, and accessibility. The data collected provides insight into our behavioral health providers' capabilities, which assists in member referral, provider network strategy development, and proposal support. Completion of the *BHAEP* does not affect a provider's credentialing materials/status or contract.

By capturing this information, we are able to:

- Improve identification of specific services and/or specialties.
- Improve the referral process by better identifying provider capabilities.
- Align with competitors that provide this data in their online provider directories.

Currently, the *BHAEP* is being administered in your market. The local health plan completes provider outreach. While data gathered through this tool has proven to be helpful to members, providers, and the health plan, response rates remain low.

View your BlueCross BlueShield of Western New York *BHAEP* survey [online](#).

NYW-NL-0536-21

Medical specialty pharmacy announcement

BlueCross BlueShield of Western New York (BlueCross BlueShield) is pleased to announce a drug delivery option that enhances medication accessibility to both members and providers. BlueCross BlueShield is contracted with CVS* Specialty as a medical specialty (MSP). Our MSP pharmacy can deliver medication that is covered under the BlueCross BlueShield medical benefit to your office for administration to the patient.

Arrange a delivery

To set up this delivery, please choose one of the following:

- **Phone:** You may call **877-254-0015** and you will be transferred to a pharmacist for a verbal prescription order. Please plan to provide your patient's BlueCross BlueShield ID located on their ID card. Staff will obtain additional information necessary to support the delivery of the medication, including the need by date. Please allow up to 10 days for processing and shipping. If it is an urgent medication and the need by date is less than seven days from the order date, please indicate this, so the order can be expedited. The staff will then make an outbound call to your patient to obtain patient consent as needed to support the delivery of the medication to your office. Once all necessary information is obtained for shipping, the staff will make an outbound call to your office to confirm delivery.
- **Fax:** You may also fax prescription orders to **866-336-8479** and a staff member will call your office to obtain additional information necessary to support the delivery of the medication as described above.
- To check on prescription order status, call **877-254-0015**.

Prior authorization reminder

As a reminder, some medications require prior authorization before they can be paid. Please review the precertification tool for a listing of covered drugs and any associated requirements available [online](#). If prior authorization is required, you may request a prior authorization by phone, fax, or electronically.

- **Phone:** **866-231-0847**
- **Fax:** **844-493-9206**
- **Electronically**

To ensure timely review of the prior authorization, please include the servicing medical specialty pharmacy and provider name during the prior authorization intake.

For details on how to request prior authorization or regarding the status of a patient's prior authorization, please [log on](#).

We are hopeful that this additional drug delivery option will be beneficial to both you and the members that you serve. If you have any questions regarding this drug delivery option, call us at **866-231-0847**.

** CVS is an independent company providing pharmacy services on behalf of BlueCross BlueShield of Western New York.*

NYW-NL-0561-21



Quality Management

Reducing the burden of medical record review and improving health outcomes with HEDIS/Quality Assurance Reporting Requirements reporting

The HEDIS®/Quality Assurance Reporting Requirements (QARR) Electronic Clinical Data Systems (ECDS) reporting methodology encourages the exchange of the information needed to provide high-quality healthcare services.

The ECDS Reporting Standard provides a method to collect and report structured electronic clinical data for HEDIS/QARR quality measurement and improvement.

Benefits to providers:

- Reduced burden of medical record review for quality reporting
- Improved health outcomes and care quality due to greater insights for more specific patient-centered care

ECDS reporting is part of the National Committee for Quality Assurance's (NCQA) larger strategy to enable a Digital Quality System and is aligned with the industry's move to digital measures.

Learn more about NCQA's digital quality system and what it means to you and your practice [online](#).

ECDS measures

The first publicly reported measure using the HEDIS/QARR ECDS Reporting Standard is the Prenatal Immunization Status (PRS) measure. In 2022, NCQA will include the PRS measure in Health Plan Ratings for Medicaid and Commercial plans for measurement year 2021.

For HEDIS/QARR measurement year 2022, the following measures can be reported using ECDS:

- Childhood Immunization Status (CIS-E)*
- Immunizations for Adolescents (IMA-E)*
- Breast Cancer Screening (BCS-E)
- Colorectal Cancer Screening (COL-E)
- Follow-Up Care for Children Prescribed ADHD Medication (ADD-E)
- Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM-E)*
- Depression Screening and Follow-Up for Adolescents and Adults (DSF-E)
- Utilization of the PHQ-9 to Monitor Depression Symptoms for Adolescents and Adults (DMS-E)
- Depression Remission or Response for Adolescents and Adults (DRR-E)
- Unhealthy Alcohol Use Screening and Follow-Up (ASF-E)
- Adult Immunization Status (AIS-E)
- Prenatal Immunization Status (PRS-E) (Accreditation measure for 2021)
- Prenatal Depression Screening and Follow-Up (PND-E)
- Postpartum Depression Screening and Follow-Up (PDS-E)

* Indicates that this is the first year that the measure can be reported using ECDS

Of note, NCQA added the ECDS reporting method to three existing HEDIS/QARR measures: Breast Cancer Screening, Colorectal Cancer Screening, and Follow-up Care for Children Prescribed ADHD Medication. Initially, the ECDS method will be optional, which provides health plans an opportunity to try out reporting using the ECDS method before it is required to transition to ECDS only in the future.

HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA).

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