

October 2023

BlueBlastSM

News Providers Can Use



 **Healthy Blue**SM
BlueChoice[®] HealthPlan of SC

Healthy Connections 

All Providers

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Provider Files, Demographics and W-9 Updates

There are times when you must update your information with BlueCross BlueShield of South Carolina. As a reminder, you should make all demographic updates through M.D. Checkup or in [My Provider Enrollment Portal](#).

These updates include:

- Business name changes.
- Address changes.
- Adding or terminating a location.
- Adding or terminating a practitioner affiliation.

You can update your W-9 information with us. To do this, complete the NPI Provider Update form in the portal and upload a copy of the new W-9. To ensure your requests are processed in a timely manner, be sure to use one of these ways for your updates.




DID YOU KNOW?

Did you know provider reconsiderations can be submitted through Availity®? Availity is an independent company that provides administrative support services on behalf of BlueChoice HealthPlan.

Submitting reconsiderations through Availity is the preferred method. It offers quicker turnaround times and is a one-stop resource for all of your provider needs. If you have questions or need support with Availity, call 800-282-4548.

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Pharmacists To Be Reimbursed for Certain Medical Services

Beginning Oct. 1, 2023, pharmacists will be allowed to be reimbursed for the following medical services for patients 18 years of age and older or patients under 18 years of age who have evidence of a previous prescription from a physician. This change is due to a new state law. The implementation will require pharmacists to enroll as a South Carolina Department of Health and Human Services (SCDHHS) provider. Pharmacists must credential with Healthy Blue through the [My Provider Enrollment Portal](#) before providing services to Healthy Blue members.

Codes	Description
99202	New patient office visit 20 minutes
99203	New patient office visit 30 – 44 minutes
99211	Evaluation and management of established patients 5 minutes or less
99212	Evaluation and management of established patients 10 – 19 minutes
99213	Evaluation and management of established patients 20 – 29 minutes
99214	Evaluation and management of established patients 30 – 39 minutes
96372	Injection of drug/substance under skin or into muscle
81025	Urine pregnancy test

Submitting claims:

To ensure proper reimbursement, make sure the claim meets these criteria:

- The pharmacy must be the billing provider.
- The place of service should be pharmacy (01).
- The modifier FP must be appended.
- It must include one of the diagnosis codes in the chart.

The reimbursement rate will be the same as the one for physician assistants and nurse practitioners. If you have questions, please contact the Customer Care Center at 866-757-8286.

Contraceptive	Initial Prescription	Repeat Prescription
Oral Contraceptive	Z30.011	Z30.41
Contraceptive Patch	Z30.016	Z30.45
Contraceptive Ring	Z30.015	Z30.44
Depo Shot	Z30.013	Z30.42
General counseling only will be billed with a Z30.09.		

Notice of Material Amendment to Health Care Contract

Prior authorization updates for medications billed under the medical benefit effective Oct. 1, 2023, the following medication codes will require prior authorization. Please note, your medical claim must include a national drug code for claims processing.

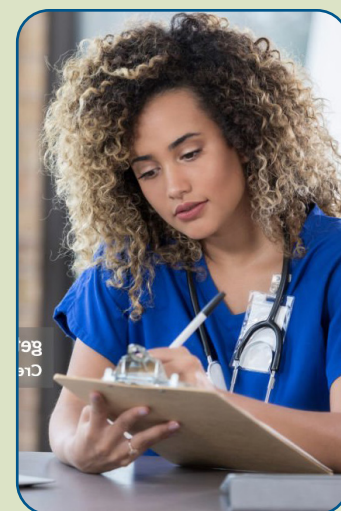
Visit the [Clinical Criteria](#) webpage to search for clinical criteria.

Clinical Criteria	HCPCS or CPT® code(s)	Drug name
CC-0072	Q5129	Vegzelma (bevacizumab-adcd)
CC-0107	Q5129	Vegzelma (bevacizumab-adcd)

What if I need assistance?

If you have questions about this communication or need assistance with any other item, contact your local provider relationship management representative or call the Customer Care Center at **866-757-8286**.

Note: Prior authorization requests for certain medications may require additional documentation to determine medical necessity.



Reminder: **Medicaid Annual Eligibility Reviews Resumed on April 1, 2023**

After the pause during the COVID-19 public health emergency, SCDHHS resumed its standard Medicaid annual eligibility reviews on April 1, 2023. This complies with terms of the Consolidated Appropriations Act, 2023.

This federally required process is in place to ensure those who are enrolled in the state's Medicaid program continue to meet established eligibility criteria. In February 2023, SCDHHS began reaching out to gather more information on members who are likely no longer qualify for the Medicaid program. Members can visit the SCDHHS website to find more information on [Medicaid annual reviews](#)*.

Members should provide updated information to SCDHHS. If they have moved without informing SCDHHS, they may miss important information they need to keep their Medicaid coverage. To update or add their contact information, members can:

- Visit [Apply.scdhhs.gov](https://apply.scdhhs.gov)*
- Call SCDHHS at 888-549-0820 Monday through Friday from 8 a.m. to 6 p.m.
- Visit an SCDHHS local eligibility office. The website has a [list of locations](#)*

To help relay the message on the importance of making updates, you can share any of the [communication materials](#)*. After selecting the link, scroll down to the Healthy Connections Medicaid Communications Toolkit section. You will find flyers, social media graphics and much more.



BlueChoice HealthPlan is an independent licensee of the Blue Cross Blue Shield Association. BlueChoice HealthPlan has contracted with Amerigroup Partnership Plan LLC, an independent company, for services to support administration of Healthy Connections. Amerigroup Corporation, an independent company, administers utilization management services for BlueChoice HealthPlan.

*Some links in this newsletter lead to third-party sites. Those organizations are solely responsible for the content and privacy policies on these sites.

The codes listed are for informational purposes only and are not intended to suggest or guide reimbursement. If applicable, refer to your provider contract or health plan contact for reimbursement information. To report fraud, call our confidential Fraud Hotline at 877-725-2702. You may also call the South Carolina Department of Health and Human Services Fraud Hotline at 888-364-3224 or email Fraudres@scdhhs.gov.