

2024 Behavioral Health Workshop



What can your Rep do for you

- Insurance billing education
- CAP mailing
- Policy Memos
- Documentation
- Coding
- On-site Visits

Important Contact Information



Customer Service Center (CSC)

Office Hours: Monday - Friday
7:00 a.m. - 4:30 p.m.

Questions regarding:

- Claim status
- Appeals
- Pre-determinations
- Benefits
- Eligibility

Contacts:

Email: csc@bcbsks.com
Phone: 800-432-3990 or 785-291-4180
Fax (written inquiries and predets):
785-290-0711
Fax (all others): 785-290-0783

CSC Providers Only Benefits Line

Office Hours: Monday - Friday
7:00 a.m. - 4:30 p.m.

Questions regarding:

- Benefits
- Eligibility

Contacts:

Email: csc@bcbsks.com
Phone: 800-432-0272 or 785-291-4183

Provider Network Services

Hotline Hours:
Monday-Wednesday, and Friday
8:00 a.m. - 4:30 p.m.

Questions regarding:

- Contracting
- Credentialing
- Network enrollment

Contacts:

Email: prof.relations@bcbsks.com
Phone: 800-432-3587 or 785-291-4135
Fax: 785-290-0734

Availity® Essentials

Office Hours: Monday - Friday
7:00 a.m. - 6:00 p.m.

Contact Availity Client Services toll free at 800-Availity (800-282-4548) or log in to Availity Essentials to submit a support ticket. Availity Client Services is available during the hours listed above.

BlueCard®

Eligibility for out-of-state members:

- Office Hours: Monday - Friday 8:00 a.m. - 4:30 p.m.
- Phone: 800-676-BLUE (800-676-2583)

Claim info for out-of-state members:

- Office Hours: Monday - Friday 7:00 a.m. - 4:30 p.m.
- Phone: 800-432-3990, ext. 4058

Case Management

Office Hours: Monday - Friday
8:00 a.m. - 4:30 p.m.

Questions regarding:

- Assistance with coordination of care for patients with complicated health issues.

Contacts:

Phone: 800-432-0216, ext. 6628 or 785-291-6628
For FEP members: 800-782-4437, ext. 6611

MiResource

Contacts: Email: support@miresource.com

Lucet

Office Hours: 24/7/365

Questions for behavioral health care:

- Preauthorizations
- Outreach services for high-risk patients
- Coordination with behavioral health care

Contacts:

Phone: 800-952-5906
Fax: 816-237-2364

Medicare Advantage

Office Hours: Monday - Friday
8:00 a.m. - 6:00 p.m.

KS members or M3A prefix

• Provider Services: 800-240-0577 Fax: 800-976-2794

• Prior Authorization/Utilization Management/Care Transition:
800-325-6201 Fax: 877-218-9089

• After Hours Utilization Management/Care Transition: 800-331-0192 Fax: 877-218-9089

• Behavioral Health Services (Lucet): 877-589-1635

• Hearing Services: 800-334-1807

• Vision Services: 877-226-1115

Federal Employee Program (FEP)

Office Hours: Monday - Friday
7:00 a.m. - 4:30 p.m.

All FEP inquiries except OPL

Contacts:

Phone: 800-432-0379 or 785-291-4181
Fax: 785-290-0764

FEP Blue Dental Contacts:

Phone: 855-504-2583
www.bcbsfedental.com

Electronic Data Interchange (ASK-EDI) - Payor ID: 47163

Office Hours: Monday - Friday
8:00 a.m. - 4:30 p.m.

Questions regarding:

- Electronic claims transmission
- Electronic RA
- Billing software
- Clearinghouse services
- Internet file transfer and passwords
- Real-time vendors

Contacts:

Email: askedi@ask-edi.com
Website: ask-edi.com
Phone: 800-472-6481 or 785-291-4178
Fax: 785-290-0720

Fraud Hotline

Office Hours: Monday - Friday
8:00 a.m. - 4:30 p.m.

Questions regarding:

- Reporting of any illegal activity involving BCBSKS. Callers may remain anonymous.

Contacts:

Phone: 800-432-0216, ext. 6400 or 785-291-7000, ext 6400.

Other Party Liability (OPL) & Pre-Existing

Office Hours: Monday - Friday
8:00 a.m. - 4:30 p.m.

Questions regarding:

- Duplicate coverage
- No-fault auto exclusion
- Subrogation
- Workers' compensation
- Pre-existing

Contacts:

Phone: 800-430-1274 or 785-291-4013
Fax: 785-290-0771

Pre-certification, Concurrent Review and Alternate Care

Office Hours: Monday - Friday
8:00 a.m. - 5:00 p.m.

Questions regarding:

- All hospital inpatient admissions

Contacts:

Phone: 800-782-4437

Teleorder

Office Hours: 24/7/365

Contacts:

Phone: 800-346-2227 or 785-291-8130

Location Address:

1133 SW Topeka Blvd
Topeka, KS 66629-0001

Billing Address:

P.O. Box 239
Topeka, KS 66601-0239



Competitive Allowance Program (CAP)

- Annual Contract Update
- Emailed towards the end of July
- Reimbursement Changes for upcoming year
- Quality Based Reimbursement Program (QBRP)
- <https://www.bcbsks.com/documents/2025-cap-annual-report>

Quality-Based Reimbursement Program (QBRP)

- Incentive plan designed to promote efficient administration and improved quality with better patient care and outcomes.
- Prerequisite – turn off paper (claims, remittance advice, newsletter) and be a provider in good standing with BCBSKS.
- Excluded – clinical lab (using codes on Medicare clinical lab fee schedule), pharmacies/pharmaceuticals and dental services.



Quality-Based Reimbursement Program (QBRP)

- Metrics are categorized into three groups – A, B, and C.
- Achievement of a metric can be measured at different intervals, depending upon the metric.
- Refer to CAP annual report for defined time frames.
- Incentives will be earned at the individual level unless otherwise specified.





Quality-Based Reimbursement Program (QBRP)

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- Please note – Changes in CPT codes (added/deleted) will be effective prospectively, including QBRP. In addition, any adjustments to QBRP payments will also be made prospectively. Any corrections will be effective the first of the following month, unless otherwise specified.

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- Confirmation of QBRP measure can be obtained real time on the provider portal. The portal will reflect real time effective and termination dates of all applicable QBRP measures.

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- All metrics, with the exception of the Provider Information Portal, will be reviewed on a semi-annual basis and any incentives earned will be effective either January 1, 2025 or July 1, 2025 as applicable.



QBRP – group A components

- Applies to all eligible CAP professional providers.
- Incentive – applies to all eligible CPT/HCPCS codes except for clinical lab (using codes on Medicare clinical lab fee schedule), pharmaceuticals and dental services.



QBRP – group A

Electronic Self-Service

(ES3) – 2.0% (96%-100%)

- Evaluated at the group level on a semi-annual basis.

Qualifying for Electronic Self-Service Incentive (ES3)

The following is a list of incentive effective dates and the corresponding qualifying periods:

Qualifying Period	Incentive begins
August 1 - October 31, 2024	January 1, 2025
February 1 - April 30, 2025	July 1, 2025



QBRP – group A

Provider Information Portal (PRT) – 2.5%

- Must verify provider information every 90 days for each individual provider within your group, and for the group itself.
- The first attestation date sets the start date for the new rolling 90 day attestation contractual requirement.
- Completion is done through BCBSKS secure website (Blue Access) found on Availity.
- **Providers who do not attest every 90 days will be suppressed from the provider directory**

Qualifying for Provider Information Portal (PRT)

The following is a list of incentive effective dates and the corresponding qualifying periods.

Qualifying Period	Incentive
September 2024 - November 2024	January 1, 2025
December 2024 - February 2025	April 1, 2025
March 2025 - May 2025	July 1, 2025
June 2025 - August 2025	October 1, 2025



QBRP – group A

Electronic Provider Message Board (EPM) – 1.0% incentive

Provider Messaging Portal – A unique electronic communication interface by which providers can address, and upload requested claim information for the purposes of supporting final claim adjudication.

- Provider should submit claims for reimbursement as described in the Contracting Provider Agreement.
- BCBSKS will load the request on the Provider Messaging Portal if additional documentation is required to substantiate a claim.
- Provider will have fifteen (15) calendar days to upload requested medical records to the Provider Messaging Portal.
- If Provider fails to substantiate the claim within 15 calendar days, the claim will be denied. Provider is responsible for resubmitting the claim if denied for lack of medical records substantiation.

Qualifying for Electronic Provider Message Board (EPM)

The following is a list of incentive effective dates and the corresponding qualifying periods:

Qualifying Period	Incentive
June 2024 - November 2024	January 1, 2025
December 2024 - May 2025	July 1, 2025
If the electronic provider message board (EPM) is used as outlined in the EPM agreement, one-time authorization allows for continuation of qualifying period without interruption.	



QBRP – group A

MiResource (MiR) – 0.5% incentive

Metric	%	Group	Description	Qualifying Period
MiResource (MiR) (Applies to Behavior Health Providers only)	0.5	A	Must enroll in MiResource provider directory in order to be eligible.	Monthly

Qualifying for MiResource Incentive (MiR)

The following is a list of incentive effective dates and the corresponding qualifying periods:

NOTE: Existing providers that have already signed up with MiResource will be allowed for continuation of qualifying period without interruption for this QBRP incentive.

Qualifying Period	Incentive begins
June 2024 - November 2024	January 1, 2025
December 2024 - May 2025	July 1, 2025



QBRP – group A

CPT II Codes (CAT2) – .50% incentive

- Add Supplemental Procedure Codes to claims
- Decreases need for medical record requests
- Produces a more accurate HEDIS score
- The provider must have 30 or more qualifying encounters during the measurement year
- Calculated at the individual provider level

Qualifying for CPT II Codes (CAT2)/ ICD-10 SDoH Codes (ZZZ) Incentives

The following is a list of incentive effective dates and the corresponding qualifying periods:

Qualifying Period	Incentive begins
July 1, 2023 - June 30, 2024 (as paid through September 30, 2024)	January 1, 2025
January 1, 2024 - December 30, 2024 (as paid through March 31, 2025)	July 1, 2025



QBRP – group A

ICD-10 SDoH Codes (ZZZ) – .75% incentive

- SDoH – Social Determinants of Health
- Supplemental diagnosis codes used to identify SDoH, 'history of' procedures, or 'acquired absence of' codes used to support HEDIS
- The provider must have 30 or more qualifying encounters during the measurement year
- Calculated at the individual provider level

Qualifying for CPT II Codes (CAT2)/ ICD-10 SDoH Codes (ZZZ) Incentives

The following is a list of incentive effective dates and the corresponding qualifying periods:

Qualifying Period	Incentive begins
July 1, 2023 - June 30, 2024 (as paid through September 30, 2024)	January 1, 2025
January 1, 2024 - December 30, 2024 (as paid through March 31, 2025)	July 1, 2025

MiResource

- Online mental health provider directory
- Filtered by patient's specific needs/preference
- In-person or Telemedicine
- To request invitation to sign up:
support@miresource.com

Specialty Guidelines

Heather Schultz, Specialty Provider Representative

- Heather.Schultz@bcbsks.com

Specialty Guidelines found on the BCBSKS.com website

- Autism Guidelines
- [professional-provider-autism-manual-2024 \(bcbsks.com\)](#)



**Thank you for being a
BCBSKS contracting
provider**