



# Professional Provider Report

A newsletter for professional providers and their staff members

December 1, 2017 • S-5-17

## What's Inside

- KU Med joins EPO, Solutions network ..... 1
- Guidelines for paper claims ..... 2
- Save time, earn incentive checking claims through Availity ..... 2
- New Directions changes stay reviews. 2
- New Directions publishes criteria ..... 2
- AIM to manage portion of Tyson plan.. 3
- AllianceRx Walgreens Prime ..... 4
- ResultsRx new formulary..... 4
- Pharmaceutical Formulary Update ..... 4
- Microcurrent Stimulation Therapy considered E/I..... 4
- Use of out-of-network third-party providers..... 5
- Clarification of 99455 for physicals..... 5
- BCBSMA expanding programs..... 6
- QBRP Earned Reporting instantly available ..... 7-9
- EPO, Solutions information ..... 10
- BCBSKS thanks Lindemuth, welcomes Falk as provider rep.....11
- Web changes — Medical policy ..... 12

The *Professional Provider Report* is published by the professional relations department of Blue Cross and Blue Shield of Kansas.

Dustin Kimmel,  
Communications Coordinator

# KU Med joins EPO, Solutions network

## Addition of KC area provider reduces exception requests

New for 2018, the University of Kansas Medical Systems (KU Med) in Kansas City is joining the Blue Cross and Blue Shield of Kansas (BCBSKS) Exclusive Provider Organization (EPO) network.

The EPO is a new product available only on the Health Insurance Marketplace and will use the same network as the BlueCross BlueShield Kansas Solutions product, which will phase out by 2019.

The addition of KU Med to the EPO network will allow EPO/ Solutions members to receive needed services, and network providers will no longer need to request exceptions to refer patients for services at KU Med.

The EPO and Solutions products do not have benefits outside the BCBSKS service area except for emergencies or services not provided within the BCBSKS service area, and KU Med.

For more information regarding the EPO and Solutions products, see page 10 or contact your professional relations representative.



[bcbsks.com](http://bcbsks.com)

# Guidelines for paper claim submissions tightening Jan. 1

Beginning Jan. 1, claims submitted on paper CMS 1500 forms with required fields left blank will be rejected for being incomplete or having invalid information.

While electronic submission of claims is preferable, typing as opposed to handwriting on paper claims is encouraged.

Handwritten claims not able to be translated by the computer will be rejected.

For more information regarding appropriate claims filing, go to [http://www.nucc.org/images/stories/PDF/1500\\_claim\\_form\\_instruction\\_manual\\_2012\\_02-v5.pdf](http://www.nucc.org/images/stories/PDF/1500_claim_form_instruction_manual_2012_02-v5.pdf).

# Save time, earn incentive by checking claims at Availity.com

The status of outstanding claims is easily accessible by signing in through Availity.com.

Other party liability information is available by logging in through Availity, as is claims status, patient eligibility, and benefit information.

Accessing claims status info, patient eligibility, benefit, and other party liability information through Availity helps providers meet the Electronic



Self-Service incentive of the Quality-Based Reimbursement Program (QBRP) while saving time and avoiding a phone call.

For more information regarding the incentive and/or QBRP, contact your professional relations representative.

## New Directions changes stay reviews for urgent care

Beginning Jan. 1, New Directions Behavioral Health will be completing continued stay reviews for urgent care on the last covered day.

This is a change from the current process, which is to complete reviews on the first uncovered day. This change will minimize the number of days uncovered during the utilization review process. Authorization letters will be adjusted to reflect this change.

## New Directions publishes revised medical criteria

New Directions Behavioral Health will publish revised medical necessity criteria for Applied Behavior Analysis for the Treatment of Autism Spectrum Disorder, effective Jan. 1.

The criteria for both Blue Cross and Blue Shield of Kansas and Federal Employee Program members can be found on the BCBSKS website at <https://www.bcbsks.com/CustomerService/Providers/Publications/professional/manuals/BPM.shtml>.



# AIM to manage oncology portion of Tyson plan

Effective Jan. 1, Tyson Foods will implement review of outpatient radiation oncology services and medical oncology treatment regimens for its employee health plan. These programs will be managed by AIM Specialty Health (AIM). AIM works with leading insurers and employers to improve health care quality and manage costs for today's most complex and prevalent tests and treatments, helping to promote care that is appropriate, safe and affordable. Tyson Foods members may be identified by the TYG prefix on Blue Cross and Blue Shield of Kansas (BCBSKS) member identification cards.

## Medical Oncology Program

The AIM Medical Oncology Program promotes optimal support for BCBSKS members' cancer care needs while reducing the costs for managing one of the most complex, expensive, and prevalent diseases. This program includes online access to support tools for selecting cancer treatment regimens, consistent with current evidence and consensus guidelines for oncologists and hematologists.

The program includes AIM Cancer Treatment Pathways (Pathways) based on medical evidence and best practices developed with leading cancer experts. Pathways offers support in identifying highly effective therapies that are often more affordable for members.

More specific than guidelines, they identify treatments based on clinical efficacy, favorable toxicity profiles, and cost. Pathways regimens are informed by a clinical library and include evidence drawn from:

- Peer-reviewed published literature
- Expert consensus statements and guidelines from professional organizations, including:
  1. American Society of Clinical Oncology (ASCO)
  2. American Society of Hematology (ASH)
  3. National Comprehensive Cancer Network (NCCN)
- Federal government agencies, including:
  1. Food and Drug Administration (FDA)
  2. National Cancer Institute (NCI)

## Program Administration

The AIM-administered program will help improve cancer care quality for eligible members and manage the associated costs for certain complex tests and treatments by promoting patient care that is appropriate, safe, and affordable.

## Radiation Oncology Review Program

This program reviews certain treatment plans against clinical appropriateness criteria to help ensure care aligns with established evidence-based medicine. Providers should contact AIM to request

pre-service review for the radiation oncology modalities and services.

## Pre-certification

For treatment plans that are scheduled to begin on or after Jan. 1, all providers must contact AIM to obtain pre-service review for the following non-emergency, outpatient radiation oncology modalities:

- 2D/3D conformational radiation therapy
- Intensity-modulated radiation therapy
- Stereotactic radiosurgery
- Stereotactic body radiotherapy
- Selective internal radiation therapy
- Brachytherapy
- Proton beam therapy

Review also is included for:

- Hypo-fractionation for bone metastases, non-small cell lung cancer and breast cancer when requesting EBRT and IMRT
- Special procedures and consultations associated with a treatment plan (CPT codes 77370 and 77470)
- Image Guided Radiation Therapy (IGRT) oncology performed as part of an inpatient admission is not part of the AIM program.

More information will be sent to the medical and radiation oncology community regarding telephone numbers and provider portals created to accommodate these programs for the Tyson Foods health plan.

# AllianceRx Walgreens Prime a new name on prescriptions

Prime Therapeutics — the specialty prescription supplier for Blue Cross and Blue Shield of Kansas — and Walgreens have partnered to form AllianceRx Walgreens Prime for specialty services beginning Jan. 1 and mail services beginning March 1.

Members receiving supplies will see labels that read “Prime Specialty filled by AllianceRx Walgreens Prime.”

This does not affect Prime’s original specialty and mail integrations of systems for specialty or mail.

## ResultsRx new formulary design

ResultsRx is a new formulary with a closed formulary design that will be used by some Blue Cross and Blue Shield of Kansas members effective Jan. 1.

Most members with this formulary will have BlueEdge

found on their ID card. The link to the prior authorization programs associated with ResultsRx can be found at [https://www.bcbsks.com/CustomerService/Providers/MedicalReview/pre-cert\\_pre-auth.shtml](https://www.bcbsks.com/CustomerService/Providers/MedicalReview/pre-cert_pre-auth.shtml).

## Microcurrent stimulation therapy E/I

Microcurrent stimulation therapy, for all applications and all indications, is experimental/investigational. This includes but is not limited to: microcurrent electrical nerve stimulation, frequency specific microcurrent, microelectrical therapy, microcurrent therapy, electrotherapeutic point stimulation, microcurrent point stimulation, microcurrent therapy, and concentrated micro-stimulation.

Microcurrent stimulation should be billed using 97039 with a description of “microcurrent

therapy” submitted in the 2400 NTE segment or box 19 of the claim form.

Any patient being billed for services considered experimental or investigational must have a valid, signed Limited Patient Waiver in his/her file and include the GA modifier (waiver on file) on the claim form (electronic or paper). Failure to discuss and obtain a valid, signed waiver in advance of the service will result in a provider write-off.

This service should not be billed using 97014 or 97032.



## Pharmaceutical Formulary Update

Prime Therapeutics updates the Blue Cross and Blue Shield of Kansas formulary (preferred medication list) on a quarterly basis. Please refer to the links below when prescribing or dispensing medications for your BCBSKS patients. Coverage is subject to the limitations of the member’s individual plan.

For commercial members, go to: [https://www.myprime.com/content/dam/prime/memberportal/forms/2017/FullyQualified/Other/ALL/BCBSKS/COMMERCIAL/KSPREFDRUG/KS\\_Alpha\\_Drug\\_List.pdf](https://www.myprime.com/content/dam/prime/memberportal/forms/2017/FullyQualified/Other/ALL/BCBSKS/COMMERCIAL/KSPREFDRUG/KS_Alpha_Drug_List.pdf)

For BlueCare/BCBSKS Solutions members, go to: [www.myprime.com/content/dam/prime/memberportal/forms/2017/FullyQualified/Other/ALL/BCBSKS/COMMERCIAL/KSBLCRDRUG/KS\\_BlueCare\\_complete\\_formulary\\_2017.pdf](https://www.myprime.com/content/dam/prime/memberportal/forms/2017/FullyQualified/Other/ALL/BCBSKS/COMMERCIAL/KSBLCRDRUG/KS_BlueCare_complete_formulary_2017.pdf)



# Out-of-network third-party provider use on the rise

Blue Cross Blue Shield of Kansas (BCBSKS) has seen an increase in services being referred or sent to non-contracting third party providers.

As per [Policy Memo No. 1, Section XIV](#), BCBSKS network providers are to use other BCBSKS network providers when outsourcing any portion of a professional service. In the event that a BCBSKS network provider does use a non-contracting third party for all or a portion (professional or technical component) of a service, the BCBSKS network referring/ordering provider is responsible for making sure the non-contracting provider does not bill either BCBSKS or the member.

Please refer to [Policy Memo 1, Section XIV](#) (at right) as contract language to this policy.

## **XIV. PROFESSIONAL SERVICES COORDINATED WITH A NON-CONTRACTING PROVIDER**

When a contracting provider uses a non-contracting provider (either in or out-of-state) to perform a portion of a professional service (e.g., professional component, technical component or other technology utilized in the performance of a service), the contracting provider must bill BCBSKS for all services. If the non-contracting provider bills the member or BCBSKS, the contracting provider will be required to hold the member harmless. However, in the event members request referrals to non-contracting providers, providers should have patients sign a statement acknowledging full understanding of the non-contracting referral and the patient's financial responsibilities. The statement should be filed in the patient's chart.

## Clarification for CPT code 99455 for Physicals

Use of CPT 99455 (work related or medical disability evaluation services) is for physicals required as a condition of employment, school entry, work permit, insurance, or immigration. These services are covered, including office calls, x-rays, and lab tests associated with the physical.

Please note: If components of an office evaluation and management (E/M) code are documented and the service is medically justified, Office E/M (99201-99205 for new patients or 99211-99215 for established patients) may be used in place of 99455.

When billing 99455, please remember to document the type of physical (school, KDOT, etc.) being performed. This should be noted in loop 2400, NTE field for electronic submission or box 19 of the CMS 1500 claim form.



# BCBSMA expanding high-tech radiology, sleep apnea programs

## Expansion of services is for Medicare Advantage PPO and HMO members

Blue Cross Blue Shield of Massachusetts (BCBSMA) is expanding its high-technology radiology and sleep apnea programs to Medicare Advantage PPO and HMO members.

### High-tech Radiology/Imaging

Effective Jan. 1, BCBSMA is expanding its high-technology radiology and sleep apnea program managed by AIM Specialty Health to our Medicare Advantage HMO and PPO members.

Prior authorization requirements will apply to all Medicare Advantage PPO and HMO members.

Beginning Jan. 1, the BCBSMA radiology prior authorization requirements will apply to all Medicare PPO and HMO members. These requirements will apply for all of the following services:

- CT & CTA
- Screening & diagnostic CT colonography
- MRI/MRA/MRS/fMRI
- Nuclear cardiac studies
- PET

- CT PET Fusion

Please note that:

- All tests must continue to meet BCBSMA medical policies. BCBSMA will only provide reimbursement for tests that meet these requirements and for which prior authorization has been obtained.
- Providers only need to request prior authorization for services rendered on an elective, outpatient basis. Prior authorization is not required when the member receives services via the emergency department, as an inpatient or observation, or when performed as part of outpatient surgery.

Starting Dec. 1, providers can submit requests and check for a member's authorization for dates of service of Jan. 1 or later.

### Obstructive Sleep Apnea Program

BCBSMA will expand its existing program for obstructive sleep apnea

(OSA) services for its Medicare Advantage HMO and PPO members Jan. 1. BCBSMA's existing program has successfully helped maintain affordability for its members, while ensuring that its members receive clinically appropriate services.

Beginning Jan. 1, BCBSMA will include Medicare Advantage PPO and HMO members in our prior authorization program for the following services:

- Home sleep test (HST)
- In-lab sleep study (PSG)
- Initial and ongoing treatment orders for DME and supplies related to sleep therapy: APAP, CPAP, BPAP
- Titration study
- Oral appliances for sleep therapy

Starting Dec. 1, ordering providers can submit requests and check for a PPO member's authorization for dates of service of Jan. 1 or later.

# QBRP Earned Reporting instantly available

Blue Cross and Blue Shield of Kansas has developed a Quality-Based Reimbursement Program (QBRP) Earned Reporting portal. The portal will be available on the secure portion of [bcbsks.com](http://bcbsks.com),

accessible through [Availity.com](http://Availity.com).

details how to use the portal.

The portal was developed for providers to have instant access to personalized QBRP information and what they are currently earning. The information on pages 7 to 9

For more information, contact your Professional Relations Representative or Provider Network Services in Topeka at (785) 291-4135 or (800) 432-3587.

## 1. QBRP Earned Reporting link

After signing in through Availity, click the “QBRP Earned Reporting” link in the Main Menu under Services.



## 2. QBRP Earned Reporting search

QBRP Earned Reporting displays (NPI and Name will be those of current logged-in user).

Type in “Reporting From Date” and “Reporting To Date,” then click “Submit.”

- Only 18 months of past claims data is available.
- The “To Date” cannot be before the “From Date.”

Search results could take a few minutes to appear depending on the number of Performing Providers attached to the NPI.

**QBRP Earned Reporting**

NPI: 9999999999

Name: ABC Clinic

Reporting From Date:

Reporting To Date:

The from and to date must be for the same year.

**SUBMIT**

Your results could take a few minutes to appear. We appreciate your patience



### 3. QBRP Earned Reporting Results

The following screen displays the results, and the search criteria stays at the top of the page. Only providers that have earned QBRP during the time period will be displayed.

## QBRP Earned Reporting

NPI: 999999999  
 Name: ABC Clinic

Reporting From Date:  Reporting To Date:

The from and to date must be for the same year.

[SUBMIT](#)

My Billing Company  
999999999

The claim amounts on this page are based on the claims processed to date for the time period selected. As additional claims are processed, these amounts may change. Estimates on this page are not binding and are presented only to serve as a tool for determining quality based incentives earned. The QBRP metrics are multiplied individually by the MAP, then totaled with the MAP to determine the total reimbursement: "QBRP MAP". DCBS\*3 will allow the less of the provider's charge or the "QBRP MAP".

<input type="button" value="Expand All"/> <input type="button" value="Collapse All"/>							
	NPI >	Name >	Total Charge	Total Allowed	QBRP Earned	Total Allowed	
<input type="radio"/>	1234567890	Performing Provider 1	\$43,321.00	\$29,800.49	\$2,550.26		8.56%
<input type="radio"/>	2345678901	Performing Provider 2	\$41,826.00	\$30,867.46	\$2,611.14		8.46%
<input type="radio"/>	3456789012	Performing Provider 3	\$36,619.00	\$27,224.04	\$1,845.89		6.78%
<input type="radio"/>	4567891023	Performing Provider 4	\$96,107.00	\$68,777.63	\$5,003.25		8.51%
<input type="radio"/>	5678901234	Performing Provider 5	\$17,652.00	\$12,204.71	\$1,015.60		8.32%
<input type="radio"/>	6789012345	Performing Provider 6	\$33,663.00	\$21,614.53	\$1,698.32		7.86%
<input type="radio"/>	7890123456	Performing Provider 7	\$51,260.00	\$34,189.62	\$2,825.92		8.27%
<input type="radio"/>	8901234567	Performing Provider 8	\$36,327.00	\$19,464.64	\$1,343.93		6.93%
Grand Total			\$352,787.00	\$234,163.62	\$18,883.70		

[EXPORT EXCEL](#)
[PRINT PDF](#)

Performing NPI

QBRP Earned/ Total Allowed = % of Total Allowed



#### 4. QBRP Earned Reporting Component Information

Users will have the capability to see the detail component information that make up the QBRP Earned for each Performing Provider.

- Click the arrow to display the components for individual performing providers.
- Click the “Expand All” button to see components for all performing providers.
- Click the “Collapse All” button to hide components for all performing providers.

<input type="button" value="Expand All"/> <input type="button" value="Collapse All"/>		NPI :	Name :	Total Charge	Total Allowed	QBRP Earned	% Total Allowed
•	1234567890	Performing Provider 1		\$43,321.00	\$29,800.49	\$2,550.28	8.56%
PRT: PROVIDER PORTAL						\$240.29	
OPN: PROGRESS NOTES						\$164.84	
ABS: ICD10 AND PROC CD SUBMITTED						\$162.94	
LAB: LABORATORY REPORTING						\$61.45	
ADT: ADMISSIONS DISCHARGE TRANSFERS						\$162.94	
MED: SEND MEDICATION HISTORY						\$161.53	
UR: TRTMT FOR CHILDREN W/UR						\$121.36	
DRP: DIABETES RECOGNITION						\$2.40	
MMR: MMR VACCINE BY AGE 2 BIRTHDAY						\$43.21	
TDP: TDAP VACCINE BY 13TH BIRTHDAY						\$43.21	
BCS: BREAST CANCER SCREENING						\$42.10	
BEK: ELECTRONIC ELIGIBILITY						\$117.89	
OUR: GENERIC UTILIZATION RATE						\$117.69	
CMM: COVER MY MEDS PRIOR AUTH						\$62.44	
HIO: H3 HEALTH INFORMATION EXCHANGE						\$196.93	
ESS: ELECTR SELF SVC 3.0 (50% OR H)						\$279.07	

#### 5. Export to Excel

Click the “Export Excel” button to export the data at the component level to a Microsoft Excel spreadsheet.



#### 6. Print a PDF

Click the “Print PDF” button to create a PDF file of the data on the screen. If the “Expand All” button is selected, the component information for each performing provider will be displayed.



# A look at EPO, Solutions

The BlueCare Exclusive Provider Organization (EPO) product is new in 2018 and will use the same network as the BlueCross BlueShield Kansas Solutions (Solutions) products. The Solutions products will phase out by 2019.

These products do not have

benefits outside of the Blue Cross and Blue Shield of Kansas (BCBSKS) service area, with the exception of in emergency situations or for services not provided within the BCBSKS service area and University of Kansas Medical Systems (see

page 1 for details).

The BCBSKS service area includes the state of Kansas excluding Johnson and Wyandotte counties.

Below are prefixes and card examples for both products.

## Prefixes for Solutions members

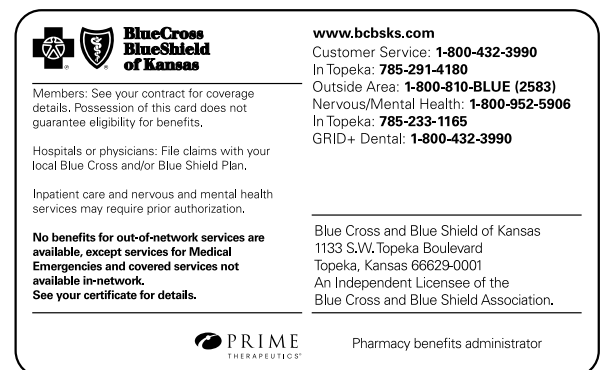
- XSC — Individual on Exchange
- XSG — SHOP on Exchange
- XSQ — Individual off Exchange
- XSR — Small Group off Exchange

## Prefixes for EPO members

- XSN — Individual on Exchange
- XSZ — Individual off Exchange
- KSA — Small Group off SHOP

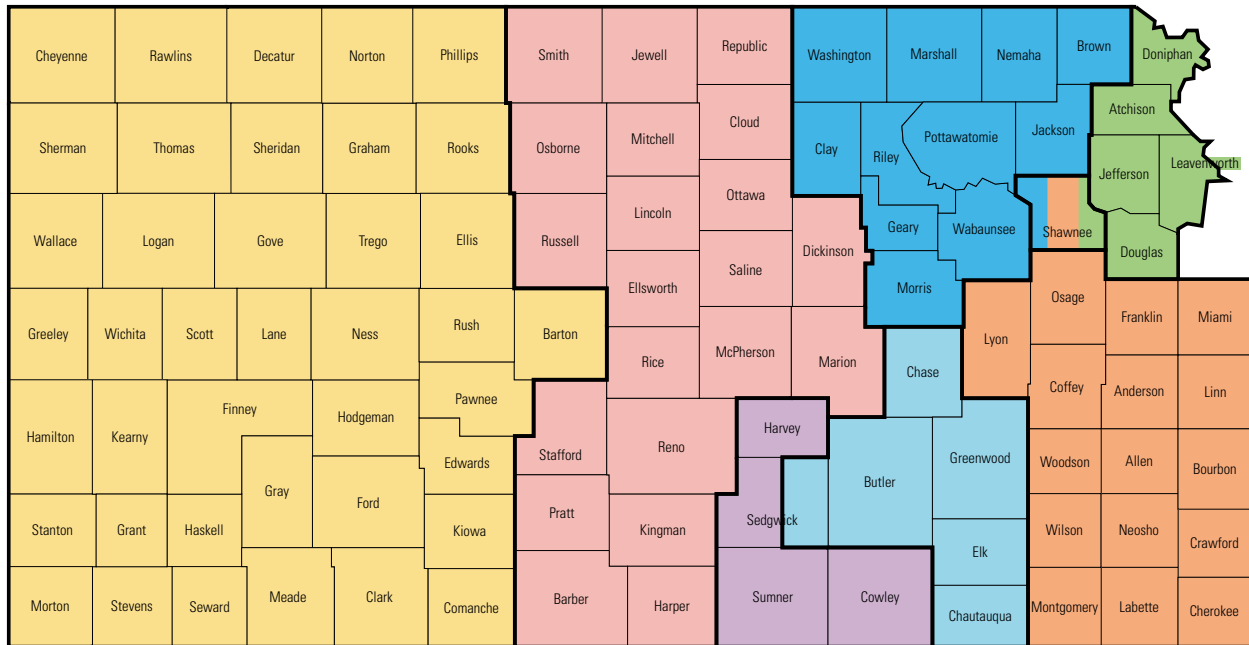


**Please note:** Empty suitcase (Solutions) vs. no suitcase (EPO)





Professional Relations Field Representative Territorial Map



MD, DO, DPM, DC, DDS, PA, APRN, CRNA, LSCSW, PHD, OD, OOD, OSAF, CCC-SLP (speech), OTR, RPT

- Gwen Nelson – Topeka – Rep. Code C
- Vickie Kloxin – Wichita – Rep. Code M
- Kyle Abbott – Wichita – Rep. Code P
- Jennie Fellers-Morgan – Dodge City – Rep. Code R

Pharmacy and Infusion Therapy

Ken Mishler, PharmD, MBA – Topeka – Rep. Code B

- Debra Meisenheimer – Hutchinson – Rep. Code K
- Christie Mugler – Topeka – Rep. Code Z
- Darin Fieger – Topeka – Rep. Code D

CCC-A (AUD), Hearing Aid Dispenser (HAD), HME, Orthotists,  
Private Duty Nurses, Prosthetists, Sleep Labs (SLAB), AMB

Jennifer Falk – Topeka – Rep. Code V



[bcbsks.com](http://bcbsks.com)

An independent licensee of the Blue Cross Blue Shield Association.

# BCBSKS thanks Lindemuth for service, welcomes Falk to new role as provider rep

Vikki Lindemuth retired

October 6 after 47 years of



Vikki Lindemuth

service to Blue Cross and Blue Shield of Kansas as a Professional Relations Representative.

BCBSKS thanks Vikki for her career of dedication and wishes her the best as she begins her retirement.

A familiar name, Jennifer Falk, will be the representative for providers who previously worked with Vikki. Jennifer is

a certified professional coder who has spent 18 years with BCBSKS in the Topeka office, most recently as the Provider Network Services supervisor.



Jennifer Falk



## Web changes — Medical policy

Since the publication of Professional Provider Report S-4-17, the following policies have been posted at: <http://www.bcbsks.com/CustomService/Providers/MedicalPolicies/policies.shtml>

- ACA Prevention Copay Waiver Criteria – Individual Marketplace, Commercial
- Accelerated Breast Irradiation and Brachytherapy Boost After Breast-Conserving Surgery for Early Stage Breast Cancer
- Actigraphy
- Acute and Maintenance Tocolysis
- Adjustable Cranial Orthoses for Positional Plagiocephaly and Craniosynostoses
- Androgens and Anabolic Steroids
- Antihypertensive Medications
- Assays of Genetic Expression in Tumor Tissue as a Technique to Determine Prognosis in Patients with Breast Cancer
- Benlysta® (belimumab)
- Cardiac Rehabilitation in the Outpatient Setting
- Computed Tomographic Angiography and Magnetic Resonance Angiography of the Head, Neck, Abdomen, Pelvis, and Lower Extremities
- Computed Tomography (CT) to Detect Coronary Artery Calcification
- Continuous or Intermittent Monitoring of Glucose in Interstitial Fluid
- Contrast-Enhanced Coronary Computed Tomography Angiography (CCTA) for Coronary Artery Evaluation
- Drug Testing in Pain Management and Substance Abuse Treatment
- Electrical Stimulation Devices for Home Use
- Electrical Stimulation of the Spine as an Adjunct to Spinal Fusion Procedures
- Electromyography (EMG), Nerve Conduction Studies (NCS), and Other Electrodiagnostic (EDX) Related Services
- Enhanced External Counterpulsation
- Expanded Molecular Panel Testing of Cancers to Identify Targeted Therapies
- Extracranial Carotid Artery Stenting
- Fundus Photography
- General Approach to Evaluating the Utility of Genetic Panels
- Genetic Cancer Susceptibility Panels Using Next Generation Sequencing
- Genetic Testing for Lynch Syndrome and Other Inherited Colon Cancer Syndromes
- H.P. Acthar Gel
- Hepatitis C First Generation Agents
- Hepatitis C Second Generation Antivirals
- Homocysteine Testing
- Hyperbaric Oxygen Therapy
- Identification of Microorganisms Using Nucleic Acid Testing
- Idiopathic Pulmonary Fibrosis
- Ingrezza (valbenazine)
- Injectable Bulking Agents for the Treatment of Urinary and Fecal Incontinence
- Insulin Prior Authorization Criteria for Individuals who purchased BlueCare/ KS Solutions products
- Insulin Pump
- Intravenous and Subcutaneous Immune Globulin Therapy
- In Vitro Chemoresistance and Chemosensitivity Assays
- Keratoprosthesis
- Lumbar Spinal Fusion
- Magnetic Resonance Imaging (MRI) of the Breast
- Measurement of Exhaled Nitric Oxide and Exhaled Breath Condensate in the Diagnosis and Management of Respiratory Disorders
- Microwave Tumor Ablation
- Miscellaneous Genetic and Molecular Diagnostic Tests
- Molecular Analysis for Targeted Therapy of Non-Small Cell Lung Cancer
- Molecular Markers in Fine Needle Aspirates of the Thyroid
- Monitored Anesthesia Care
- Multigene Expression Assay for Predicting Recurrence in Colon Cancer
- Multiple Sclerosis Agents
- Neprilysin Inhibitor (Entresto™)
- New to Market Drugs
- Noninvasive Prenatal Screening for Fetal Aneuploidies and Microdeletions Using Cell-Free Fetal DNA
- Ocaliva (obeticholic acid)
- Otezla (apremilast)
- Outpatient Pulmonary Rehabilitation
- PathFinderTG® Molecular Testing
- Percutaneous Balloon Kyphoplasty, Radiofrequency Kyphoplasty, and Mechanical Vertebral Augmentation
- Percutaneous Left Atrial Appendage Closure Devices for Stroke Prevention in Atrial Fibrillation
- Periodontal Soft Tissue Grafting
- Periureteral Bulking Agents as a Treatment of Vesicoureteral Reflux
- Photodynamic Therapy for Choroidal Neovascularization
- Positron Emission Tomography (PET) Scanning: Cardiac Applications
- Positron Emission Tomography (PET) Scanning: Oncologic Applications
- Prophylactic Mastectomy
- Radiofrequency Ablation of Miscellaneous Solid Tumors Excluding Liver Tumors
- Scanning Computerized Ophthalmic Diagnostic Imaging Devices
- Scintimammography and Gamma Imaging of the Breast and Axilla
- Selective Serotonin Inverse Agonist
- Self Administered Oncology Agents
- Small Bowel/Liver and Multivisceral Transplant
- Sphenopalatine Ganglion Block for Headache
- Statin Therapy
- Surgical Treatment of Gynecomastia
- Surgical Treatment of Snoring and Obstructive Sleep Apnea Syndrome
- Synagis (palivizumab)
- Total Artificial Hearts and Ventricular Assist Devices
- Translarna (ataluren)
- Vagus Nerve Stimulation
- Virtual Colonoscopy/CT Colonography
- Wearable Cardioverter Defibrillators

**Questions?** Contact your professional relations representative or provider network services in Topeka at (785) 291-4135 or (800) 432-3587.

**Acknowledgement:** Current Procedural Terminology (CPT®) is copyright 2016 American Medical Association (AMA). All rights reserved. No fee schedules, basic units, relative values or related listings are included in the CPT. The AMA assumes no liability for the data contained herein. Applicable ARS/DFARS restrictions apply to government use. Codes published herein are current on the publication/effective date and are subject to change.

Sent to: CAP excluding dentists and pharmacies. Contains public information.



**BlueCross  
BlueShield  
of Kansas**

[bcbsks.com](http://bcbsks.com)