

# Blue Choice PPO<sup>SM</sup> and Blue High Performance Network<sup>®</sup> (BlueHPN)<sup>®</sup> Provider Manual - Support Services

**Important Note**

Throughout this provider manual there will be instances when there are references unique to **Blue Choice PPO, Blue High Performance Network, Blue Edge, EPO and the Federal Employee Program**. These specific requirements will be noted with the plan/network name. If a plan/network name is not specifically listed or the "**Plan**" is referenced, the information will apply to **all** products.

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## Blue Choice PPO and BlueHPN Provider Manual - Support Services

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### Overview

**Blue Choice PPO** and **Blue High Performance** plans are subsidiaries of Blue Cross and Blue Shield of Texas (BCBSTX), a Division of Health Care Service Corporation, a Mutual Legal Reserve Company, an Independent Licensee of the Blue Cross and Blue Shield Association. **Blue Cross Medicare Advantage PPO<sup>SM</sup>** utilizes the **Blue Cross Medicare Advantage PPO<sup>SM</sup> Supplement** in addition to this manual.

Included in this section, is information on Network Management's role and how to access information about these plans.

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### Support Areas

BCBSTX provides support to its health care providers through:

- Provider Customer Service Department
- Network Management Representatives
- Medical Management Department

You and your staff are encouraged to contact these sources when you have questions or need assistance.

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### Commitment

BCBSTX is dedicated to serving our customers through the provision of health care coverage and related benefit services. Our mission calls for us to respond to our customers with promptness, sensitivity, respect, and dignity.

In support of this mission, BCBSTX encourages appropriate utilization decisions; it does not sanction or encourage decisions based on inappropriate compensation. Health care providers and/or BCBSTX staff do not receive compensation or anything of value based on the number of adverse determinations, reductions or limitations of length of stay, benefits, services or charges. Any person(s) making utilization decisions must be especially aware of possible underutilization of services and the associated risks.

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### Products and Benefit Plans

The following **commercial** or **retail** products and benefit plans for fully insured and administrative services Only (ASO) members are included in this manual:

- Blue Choice PPO<sup>SM</sup>
- Blue Edge<sup>SM</sup>
- Blue High Performance Network<sup>®</sup>(Blue HPN)
- Exclusive Provider Organization (EPO)
- Federal Employee Program (FEP)<sup>®</sup>
- Indemnity Traditional (ParPlan)

**BCBSTX** also administers the **Blue Cross Medicare Advantage PPO** plan. In addition to referring to this manual, providers should reference the **Blue Cross Medicare Advantage PPO Supplement** located on the provider website.

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### Network Management Department Objective

The major objective of the BCBSTX Network Management Department is to develop and support relationships between health care providers and BCBSTX to allow our subscribers access to cost-efficient medical care.

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### Network Management Department Responsibilities

BCBSTX Network Management Department Representatives are dedicated to building strong relationships with our network of contracted health care providers by providing:

- Valuable health information on BCBSTX products
- Claims enhancement programs
- Continuing education
- Accessibility to our staff through visits, telephone communication and email
- Continuous enhancements to our various communication technologies
- Guidance for your office staff on policies and procedures
- Assuring accurate information in claims payment systems (e.g., tax identification, National Provider Identification (NPI) number, address, panel status)
- Contract information
- Compliance with state and federal regulatory requirements

The Network Management Department is available to provide information, answer questions, address concerns and offer assistance in resolving any issues you or your staff may have. You may contact them by email, telephone or postal mail. Please provide the Tax Identification Number, NPI, and if applicable, Medicare Numbers for your provider when contacting Network Management. Refer to the contact information below or the [Contact Us](#) page on the provider website.

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### Network Management Regional Office Locations

**Abilene/Midland/San Angelo:**

1001 E. Lookout Drive  
Richardson, TX 75082  
Email:  
Provider\_Relations\_Midland@bcb  
stx.com  
Phone: 1-361-878-1623  
Fax: 1-361-852-0624

**Amarillo/Lubbock:**

1001 E.  
Lookout Drive Richardson, TX  
75082  
Email:  
Provider\_Relations\_South\_Texas  
@BCBSTX.com  
Phone: 1-361-878-1623  
Fax: 1-361-852-0624

**Austin and Central TX** (*Bastrop,  
Bell, Bosque, Burlleson, Burnett,  
Caldwell, Falls, Fayette, Hays, Hill,  
Lee, Leon, Limestone, Madison,  
Milam, McLennan, Robertson,  
Travis, Williamson counties*):

Arboretum Plaza II  
9442 Capital of Texas Hwy N Ste  
500 Austin, TX 78759  
Email:  
PPNAustin@bcbstx.com  
Phone: 1-800-336-5696 or  
1-512-349-4847  
Fax: 1-512-349-4853

**Corpus Christi and the Valley:**

4444 Corona, Ste 148 Corpus  
Christi, TX 78411  
Email:  
provider\_relations\_south\_texas@  
bcbstx.com  
Phone: 1-361-878-1623  
Fax: 1-361-852-0624

**El Paso:**

114 Mesa Park Dr. Suite 300  
El Paso, TX 79912  
Email:  
Provider\_relations\_el\_paso@bcbstx  
.com  
Phone: 1-915-496-6600, press 2  
Fax: 1-915-496-6614

**Golden Triangle (Beaumont,  
Orange, Port Arthur) and**

**Houston:** 1800 West Loop South,  
Ste 600 Houston, TX 77027  
Email: Provider\_relations\_houston@b  
cbstx.com  
Phone: 1-713-663-1149  
Fax: 1-713-663-1227

**North Texas, Dallas, Fort Worth,  
East Texas** (*Excludes Bastrop, Bell,  
Bosque, Burlleson, Burnett, Caldwell,  
Falls, Fayette, Hays, Hill, Lee, Leon,  
Limestone, Madison, Milam,  
McLennan, Robertson, Travis,  
Wichita and Williamson counties*):

1001 E. Lookout Drive Richardson,  
TX 75082  
Email:  
provider\_relations\_dfw@bcbstx.com  
Phone: 1-800-749-0966 or  
1-972-766-8900  
Fax: 1-972-766-2231

**San Antonio and Laredo:**

17806  
IH 10 West, Bldg II, Ste 200 San  
Antonio, TX 78257  
Email: provider\_relations\_south\_tex  
as@bcbstx.com  
Phone: 1-361-878-1623  
Fax: 1-361-852-0624

**ANCILLARY - STATEWIDE:** Refer to the [Contact Us](#) page on the provider website listed by ancillary specialty type.

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### **Medical Directors and Medical Advisory Committees**

BCBSTX Medical Directors are located throughout the state. They provide physician support for BCBSTX quality and health management programs, including care management, medical policy, credentialing and recredentialing, quality of care review, and pharmacy.

BCBSTX has two statewide peer review committees whose primary responsibility is to review the credentials of new providers being credentialed and of established providers who are undergoing recredentialing. They are the Texas Medical Advisory Committee (TMAC) and the Texas Peer Review Committee (TPRC). The TMAC and TPRC members are practicing physicians and other health care providers who also participate in networks serving subscribers of BCBSTX health programs.

The committees are chaired by the Medical Director, Health Care Quality and Policy. Other medical directors who are assigned responsibilities in the credentialing and recredentialing process also sit on the committees. Each committee meets monthly. Meetings are conducted by telephone conference call to accommodate the statewide distribution of the committee membership.

In addition to peer review of credentialing and recredentialing, the committees provide oversight of the quality of care process and as requested provide review and feedback on clinical matters such as clinical practice guidelines, utilization review criteria, and quality improvement initiatives.

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### Member Training

Members are provided training on using their **Plan** benefits. BCBSTX provides members and employer groups with educational materials and training to better understand the program and the benefits of seeking care from participating **Plan** health care providers.

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### Health Care Provider Orientation Training

BCBSTX provides a welcome letter to each BCBSTX health care provider participating in the **Blue Choice PPO** network. The welcome letter includes the participating health care provider's effective date, a link to the list of Network Management Office Locations as well as pertinent information on participating in the network. In addition, for more detail, there is an online [Provider Orientation](#) available for review and providers can also request a visit by their [Provider Network Representative](#).

BCBSTX recommends that all health care providers and their office personnel become familiar with each section of this Provider Manual as well as the BCBSTX provider website.

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### Online Provider Directory/ Website Information

BCBSTX health care providers can be identified through the Internet using the online provider directory, [Find a Doctor or Hospital](#) also known as Provider Finder<sup>®</sup>. The online Provider Finder is updated daily. To view Provider Finder, visit the BCBSTX Provider website at [bcbstx.com/provider](http://bcbstx.com/provider), and under the Network Participation, scroll down to **Provider Finder** under **Related Resources**.

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### Blue Review Newsletter

The Blue Review newsletter is available on the BCBSTX Provider website. The newsletter is produced on a monthly basis. To view the most current Blue Review newsletter or archived versions online, visit the BCBSTX Provider website at [bcbstx.com/provider](http://bcbstx.com/provider), under **Education and Reference** select Blue Review or go directly to the [Blue Review](#) page.

Be sure to reference the Regulatory and Requirements for pertinent day to day information for your practice. The Blue Review will be emailed to you **and** your team members if we have your current email address. Please submit emails using the [Demographic Change Form](#).

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### Secure Server Policy

**Please note:** BCBSTX staff will accept and open emails from its Business Associates and other providers sent via their own Secure Server technology when the emails contain Protected Health Information (PHI), Sensitive Personal Information (SPI), and/or Business Confidential Information (BCI). Any emails not containing PHI, SPI, and/or BCI should not be sent via Secure Server technology. Rather, in order to allow for more efficient and productive exchanges (with documentary email trail), BCBSTX will encourage external parties to send emails that do not contain PHI, SPI, and/or BCI via regular unencrypted email.

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### Provider Access & Servicing Strategy (PASS) Education Opportunities

The BCBSTX Provider Access and Servicing Strategy (PASS) Group offers customized instructions to all BCBSTX participating health care providers. PASS is committed to offering focused and educational opportunities to maximize effectiveness and satisfaction in the BCBSTX networks.

**Education options include:**

- **Comprehensive Education**
  - BlueCard (Out of State Subscribers)
  - ClaimsXten and Clear Claim Connection (C3) Web-based auditing reference tool
  - Electronic Funds Transfer (EFT), Electronic Remittance Advice (ERA) and Electronic Payment Summary (EPS)
  - Fully Funded vs. Administrative Services Only (ASO) Groups
  - Predeterminations
  - Provider Website Tour
  - Refund & Recoupment Process
  - And much more!
  
- **Self-Service Education**
  - Availity® for checking patients' eligibility, benefits, claims status, prior authorizations and more
  - Electronic Refund Management (eRM)
  - Interactive Voice Response (IVR) System – Guided assistance to include FAX Back functionality
  - Availity Authorizations & Referrals for Inpatient Admissions and Select Outpatient Prior Authorizations and Referral Authorizations

This information is posted on the BCBSTX Provider website. Go to the **Education & Reference** menu and select **Provider Training**, then select [Provider Training Webinars](#).

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### Provision of Contract Copies

BCBSTX shall provide a copy of its contract with a particular participating health care provider (including without limitation a contract with a physician organization or a physician group in which such health care provider participates) to such participating health care provider upon receipt by BCBSTX of a written request by such participating health care provider to provide such copy, except in circumstances where BCBSTX is restricted from providing a participating health care provider with a copy of BCBSTX's contract with a physician organization or physician group specifically because of terms contained in that contract.

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### Request a Sample of Maximum Allowable Fees

Participating\* providers can request samples of the maximum allowable fees for your specialty as follows:

- Online using the [Availity Fee Schedule](#) tool. You can request up to 20 codes per request and get immediate fee schedule results.
- Online using the [Fee Schedule Request Form](#) located on the Provider website under **Standards & Requirements/ General Reimbursement Information**.

You will need the following information to request a fee schedule:

- Health Care Provider's National Provider Identifier (NPI) Number(s)
- Health Care Provider's name
- Health Care Provider's address
- Health Care Provider's phone number
- Health Care Provider's email address
- Primary Specialty
- Office Contact name, phone number & fax number
- Network or Product type: Blue Choice PPO and Blue HPN
- Facility or Non-Facility
- Requested Fee Schedule's Effective Date

\* Dental (DDS) providers, contracted with the Dental Network of America (DNOA, must email [DNOA](#) for reimbursement related questions or fee schedule requests. For non-contracting provider reimbursement, contact Provider Customer Service at **1-800-451-0287** for reimbursement information.

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### Provider Customer Service

The BCBSTX Provider Customer Service staff is dedicated to serving **Plan** network health care providers. Customer Service Advocates are available to provide prompt inquiry responses concerning:

- Benefits
- Claims
- Verification
- Member eligibility
- Current Primary Care Provider (PCP) and Specialty Care Provider (SCP) information
- General network concerns, including complaints and appeals

### Telephone Numbers and Hours

For information or assistance on benefits, checking eligibility, verification or claims, please call Provider Customer Service.

Member Belongs To	Customer Service Telephone Numbers	Hours Monday - Friday
<b>Blue Choice PPO</b>	<b>1-800-451-0287</b>	8 a.m. - 8 p.m. CST
Blue High Performance Network ( <b>HPN</b> )	<b>1-800-451-0287</b>	8 a.m. - 8 p.m. CST
BlueCard (out of state)	<b>1-800-676-2583</b> <i>(for benefits &amp; eligibility)</i> <b>1-800-451-0287</b> <i>(for claims status)</i>	7 a.m. - 7 p.m. CST  8 a.m. - 8 p.m. CST
BlueEdge	<b>1-800-451-0287</b>	8 a.m. - 8 p.m. CST
EPO	<b>1-800-451-0287</b>	8 a.m. - 8 p.m. CST
Federal Employee Program	<b>1-800-442-4607</b>	9 a.m. - 5 p.m. CST
Indemnity (ParPlan)	<b>1-800-451-0287</b>	8 a.m. - 8 p.m. CST

Availity is a trademark of Availity, LLC, a separate company that operates a health information network to provide electronic information exchange services to medical professionals. Availity provides administrative services to BCBSTX.

BCBSTX makes no endorsement, representations or warranties regarding third party vendors and the products and services they offer.