



BLUE REVIEW™

For Contracting Institutional and Professional Providers

November 2008



Provider Network Relations Spotlight 2

In the Know 2

You Spoke, We Listened, Now Let's Talk 3

New Account Groups 4

Pharmacy Program Update 4

National Transition to Propelled Albuterol Inhalers 5

Diabetic Supplies to be Assigned Formulary Status 5

Attention Multi-specialty Groups 6

Take Advantage of these Green Solutions 6

EFT Holiday Schedule 7

New Wellness Resources for Your Office

BCBSIL encourages its members to take an active role in managing their health. Our library of online tools and workplace resources is available to help educate members on healthy lifestyle choices and setting goals to make improvements.

Recent additions to boost interest in wellness include posters and pads of information about weight control and smoking cessation. Designed to be displayed in your office, the posters offer quick, memorable tips, and the pads include take-away pointers. Both items are available in English and Spanish.

Your Provider Network Consultant has a supply of these new wellness resources and may be stopping by to leave some with you. Thank you for your participation in this initiative on behalf of your patients and our members.

Innovative Diabetes Program Shows Positive Outcomes

In 2007, BCBSIL collaborated with businesses and local physicians in the Bloomington-Normal area to launch the Diabetes Checks & Balances program. This program helps people manage their diabetes by encouraging participants to see their doctor regularly and to have a series of tests that will help them monitor their condition. We believe that using clinical measures to report performance ultimately enhances the quality and efficiency of care delivered to our members and improves clinical outcomes.

The first program of its kind in Illinois, Diabetes Checks & Balances encourages people with diabetes to contact their physicians and arrange for four tests, including HbA1c (a test indicating the level of blood sugar control), low-density lipoprotein (LDL) cholesterol, an eye exam and screening for kidney disease. More than 600 area residents met the criteria for participation, and 29 percent received all four of the tests – almost twice as many as in 2006, before the program started.

BCBSIL collaborated with McLean County employers and health care providers on the Diabetes Checks & Balances program, including COUNTRY Financial, Mitsubishi Motors North America, Inc., State Farm Insurance®, and numerous other local employers to target this population and move them toward care.

As part of the program, we identified our local members with diabetes and sent them information about diabetes and the program. Through the program, local physicians became actively engaged in improving the care of diabetics. In addition, we hosted diabetes screenings in the workplace and elsewhere throughout the area. Physicians were rewarded for presenting documentation that necessary preventive care services were provided to their diabetic patients.

Results Highlights

We are pleased to report results that show the number of emergency room visits and hospital admissions among participating members has dropped, and more members than last year are getting the medical tests they need.

Of those who participated:

- Seventy-nine percent (79%) had an HbA1c test, an increase of 14 percentage points compared to 2006. The percentage of people with diabetes with controlled blood sugar improved by 13 percentage points.
- Seventy-six percent (76%) were screened for LDL, up 14 percentage points over 2006. The rate of LDL control increased from 52% to 65%.
- Eye exams increased as well, by 18 percentage points compared to the year before.
- An additional 13% received medical attention for kidney disease.

BCBSIL will continue to initiate these types of programs, and we appreciate your cooperation and support to guarantee their success.

Provider Network Relations Spotlight

In this section of the newsletter, we introduce you to some of the key players on our Provider Network Relations team, briefly describing their areas of expertise and their objectives in providing the best service to our provider community. This issue features two of our Senior Provider Network Consultants, Joyce Campbell and Katie Gordon.



Joyce Campbell has been a member of the Provider Network Relations team for 15 years. Prior to joining BCBSIL, Joyce worked at a hospital in various capacities for nearly 17 years. She served as Business Office Manager for the hospital and a 50-bed Skilled Nursing Facility, worked with administration on various

special projects and assisted with opening the hospital's Home Health Agency, Durable Medical Equipment and Home Infusion Therapy services. It's no surprise that Joyce's current occupation involves providing service to the hospitals and surgery centers in the BCBSIL participating network in Southern and East Central Illinois. While "understanding and reacting to the complexities of the ever changing world of health care" can be challenging, Joyce says the environment is also very satisfying, especially when there is "a successful outcome when assisting providers with their problems." **Joyce Campbell is available via telephone at (618) 357-6037, or you may e-mail her at joyce_campbell@bcbsil.com.**



Katie Gordon has worked at BCBSIL for 12 years. Originally a member of the claims processing team, Katie eventually made her way to the Provider Relations area, where she has been working for two years. She currently provides service to our Western Illinois professional providers in the counties of Bureau, Henderson,

Henry, Knox, Lee, Marshall, Mercer, Putnam, Stark and Warren. With her extensive background in customer service and claims, Katie is well-equipped to advise providers about BCBSIL tools, resources and educational services. Katie says that one of the biggest challenges she faces is that there is "not enough time in the day to reach out to as many providers as we have in our network." She finds the most rewarding aspect of her job to be making direct contact with providers, especially when "walking into an office where they did not know I existed." **Katie Gordon is available via telephone at (312) 653-4726, or you may e-mail her at gordonk@bcbsil.com.**

Medical Policies on the Web

All Medical Policies approved by BCBSIL are accessible on our Web site for you to consult in the management of your patients' health care. When using these Medical Policies, please be mindful that they serve as guidelines for health care benefit coverage decisions, which may vary according to the different products and benefit plans offered by BCBSIL, unless otherwise indicated.

In the event of a conflict between a Medical Policy and any plan document under which a member is entitled to Covered Services, the Plan document will govern. Plan documents include, but are not limited to, Certificates of Health Care Benefits, benefit booklets, Summary Plan Descriptions, and other coverage documents.

Note: For BCBSIL HMO Members, the appropriateness of a particular treatment is determined by the referral decision of that member's Primary Care Physician (PCP). The HMO Scope of Benefits, and the Medical Policy serve as guidelines in the health care referral decision, but cannot be used to override the referral decision of a PCP.

To review all BCBSIL Medical Policies, visit our Web site at www.bcbsil.com/provider and select "Medical Policies" in the Provider Library section. You must first agree to the Terms and Conditions in the Medical Policies Disclaimer before gaining access.

Existing policies are located under "Active Policies," and are categorized in alphabetical order. New or revised policies that are awaiting implementation can be found under "Pending Policies," and will be available on the first day of each month. The specific effective or implementation date is noted for each policy that is posted.

Always check our Medical Policy site to assist you with coverage decisions for your BCBSIL patients.



In the Know...

this month's topic for professional providers:
Contract Copies, Changes and Questions

| | |
|--|---|
| How do I obtain a copy of an existing contract? | Contact Provider Services at (312) 653-5888. |
| How do I add another provider to my contract? | Send an e-mail to network_development@bcbsil.com , and include the following information: Provider's name, provider's specialty, date joining the group, Tax ID number, and Individual (Type 1) NPI number. |
| How do I remove a provider from my contract? | Send an e-mail to network_development@bcbsil.com . Indicate the name, Tax ID number and Individual (Type 1) NPI of the provider leaving the group. |
| How can I make a Business Name Change? | A new contract will be needed. Please visit our Provider Web site at www.bcbsil.com and click on Request a Contract Application in the Credentialing / Contracting section. |
| What if I have other questions pertaining to my contract? | Contact Network Development at (312) 653-5333, or send an e-mail to network_development@bcbsil.com . |

Harvest the Rewards of Education

The Network Management Education Team is dedicated to providing complimentary educational Webinars and workshops for the BCBSIL contracting provider community. Whether you are new to the network, or an experienced provider, our “Harvest the Rewards of Education” workshop is designed to help improve administrative efficiencies in your office.

Some of the topics include:

- Eligibility and benefit tools
- Consumer Driven Health Plan (CDHP)
- Medicare Advantage
- Pre-certification and predetermination
- BlueCard® Program (out-of-area)
- Refund process ... and more!

Register today to reap the rewards of provider education! Visit our Web site at www.bcbsil.com/provider/training.htm to view the agenda and to sign up for this or one of our other workshops that are tailored to meet your needs.

Upcoming workshops include:

| Workshop | Date | Location |
|---------------------------------|---------------|---------------------------|
| New Provider Workshop | Nov. 12, 2008 | BCBSIL, Chicago, Illinois |
| Winter HMO Administrative Forum | Dec. 10, 2008 | BCBSIL, Chicago, Illinois |

You Spoke, We Listened, Now Let's Talk...

BCBSIL Invites You to an Interactive Voice Response (IVR) Webinar

The BCBSIL Network Management Education and Provider Telecommunications Center (PTC) teams cordially invite you to attend an **Interactive Voice Response (IVR) Webinar session** on **December 9, 2008**, from **10 a.m. to 12 p.m.** We've heard your concerns since the implementation of our new system and we are excited to share helpful information to make your call experience with the PTC more positive and efficient.

During this online session we will:

- Discuss BCBSIL's IVR initiative
- Explain new enhancements (including pre-certification, and language consistency and clarification)
- Provide tools and tips (including caller guides and benefit collection sheets)
- Offer you an opportunity to provide feedback regarding the IVR system

A special conference number and URL will be provided with your e-mail confirmation once you register. Just use your computer to log in from the convenience of your desk, and then conference in by telephone.

Register now via our Web site at www.bcbsil.com/provider/training.htm. If you have questions regarding the IVR Webinar, please e-mail us at PAET@bcbsil.com, or call (312) 653-4019.

We look forward to your participation!



Encompass Contact Information

The Board of Education (active members) and the City of Chicago account groups utilize an outside vendor called Encompass to handle requests for services that require authorization. The telephone number for Encompass is (800) 373-3727. When you contact Encompass, you will be given a temporary reference number until the full clinical information is received. This number will have a total of 14 - 16 digits with a dash in the middle. Once you receive this number, you can visit the Encompass Web site at www.encompassonline.com to verify authorization. Please note that the reference number will not work on the Web site if the request for authorization is DME related. This site can also be used to begin a request, submit clinical information and check authorization status.

Blue Coverage for International Members from Jamaica Terminated

Effective October 31, 2008, Blue health insurance coverage for international Blue Plan members from Jamaica was terminated. Members who were part of the Blue Cross Jamaica Ltd. (BCJL) Plan carried ID cards with the alpha prefix: JAM.

Remember to always verify eligibility and benefits prior to rendering services to any out-of-state Blue Plan member by calling (800) 676-BLUE. Please note the following:

- You should no longer be accepting ID cards with the alpha prefix JAM. Claims for services rendered after Oct. 31, 2008, will not be reimbursed.
- For services rendered prior to Oct. 31, 2008, submit all claims to BCBSIL no later than March 31, 2009.

There are no changes to claims processing for any other international Blue Plan members, which means you may continue to provide services to them as you do today. If you have any questions, please contact our Provider Telecommunications Center at (800) 972-8088. For further information regarding the termination and international claims process, please e-mail IPP-ProgramMgmt@BCBSA.com.

New Account Groups

Group Name: **Federal Reserve Bank**
 Group Number: **088455**
 Alpha Prefix: **FRB**
 Product Type: **PPO(Portable)**
 Effective Date: **Jan. 1, 2009**
 BC ● BS ●

Group Name: **Harden Healthcare**
 Group Number: **028904-07**
 Alpha Prefix: **HJD**
 Product Type: **PPO(Portable)**
 Group Number: **028908**
 Alpha Prefix: **XOT**
 Product Type: **CMM**
 Effective Date: **Jan. 1, 2009**
 BC ● BS ●

Group Name: **Kemper Insurance Companies**
 Group Number: **805703**
 Alpha Prefix: **XOF**
 Product Type: **PPO(Portable)**
 Effective Date: **Jan. 1, 2008**
 BC ● BS ●

Group Name: **Navigant Consulting**
 Group Number: **084353**
 Alpha Prefix: **UTL**
 Product Type: **PPO(Portable)**
 Effective Date: **Jan. 1, 2009**
 BC ● BS ●

Group Name: **PepsiAmericas**
 Group Number: **014910, 030474**
 Alpha Prefix: **PAI**
 Product Type: **PPO(Portable), HCA**
 Effective Date: **Jan. 1, 2009**
 BC ● BS ●

Group Name: **Schneider Electric North America**
 Group Number: **737248-52, 737255**
 Alpha Prefix: **LSJ**
 Product Type: **PPO(Portable)**
 Group Number: **737253**
 Alpha Prefix: **XOT**
 Product Type: **CMM**
 Group Number: **737254**
 Alpha Prefix: **LSJ**
 Product Type: **CDHP**
 Effective Date: **Jan. 1, 2009**
 BC ● BS ●



Pharmacy Program Updates

Drug Dispensing Limit Changes

BCBSIL's standard prescription drug benefit uses an open formulary design, which allows for coverage of all FDA-approved prescription medications with the exception of non-self-administered injectables and certain therapeutic category exclusions, such as cosmetic drugs, which may vary based on employer group. Generally, there is a 34-day supply limit for most medications at retail and a 90-day limit for mail service. However, certain medications have dispensing or quantity limits to help ensure appropriate utilization and to prevent stockpiling. Dispensing limits are based on FDA-approved dosage regimens and product labeling.

For a more extensive list of drug dispensing limits visit www.bcbsil.com/rx/pdf/drug_dispensing_limits_2008.pdf.

On Jan. 1, 2009, we will implement new drug dispensing limits on drugs for osteoporosis, proton pump inhibitors, diabetes and pain. A 30-day supply limit will also be implemented for the following drug categories/drugs*:

- Cystic fibrosis agents: Pulmozyme, TOBI
- Growth Hormones: Genotropin, Humatrope, Increlex, Norditropin, Nutropin, Nutropin AQ, octreotide, Omnitrope, Saizen, Sandostatin, Somavert, Tev-tropin, Zorbtive
- Hepatitis agents: Infergen, Intron A, Pegasys, PegIntron, Roferon A
- Prostate Cancer: Eligard (not depot), leuprolide, Lupron (not depot)
- Thalomid

Formulary Changes

Based on the availability of new prescription medications and Prime's National Pharmacy and Therapeutics Committee's review of changes in the pharmaceuticals market, some revisions will be made to the BCBSIL formulary effective Jan. 1, 2009.

Drugs Moving to Non-Formulary Status Jan. 1, 2009

| Non-Formulary Brand* (Tier 3 copayment/ coinsurance) | Indication | Generic Alternative(s) (Tier 1 copayment/ coinsurance) | Formulary Brand Alternative(s)* (Tier 2 copayment/ coinsurance) |
|--|-------------------|--|---|
| Genotropin | Growth Hormone | N/A | Omnitrope |
| Nutropin/Nutropin AQ | Growth Hormone | N/A | Omnitrope |
| OrthoEvra | Contraception | Any generic monophasic oral contraceptives | NuvaRing, Yaz |
| Protonix | Acid Reflux/Ulcer | Omeprazole | Nexium |
| Provigil | Narcolepsy | dextroamphetamine, dextroamphetamine ext-release, methylphenidate, methylphenidate ext-release | N/A |

N/A = Not available

*Third party brand names are the property of their respective owners.

National Transition to Propelled Albuterol Inhalers

The FDA recently issued a Public Health Advisory (May 30, 2008) to alert patients, caregivers, and health care professionals of important information about albuterol inhalers. As part of a multi-year phase out, chlorofluorocarbon (CFC) propelled albuterol inhalers will no longer be available after December 31, 2008. This means that pharmacists **cannot dispense or return** any remaining inventory after this date. Health care professionals should plan to transition patients to the hydrofluoralkane (HFA) propelled albuterol inhalers as soon as possible.

Currently, there are three approved HFA propelled albuterol inhalers: PROAIR HFA Inhalation Aerosol, PROVENTIL HFA Inhalation Aerosol, and VENTOLIN HFA Inhalation Aerosol. In addition, an HFA propelled inhaler containing levalbuterol, a medicine similar to albuterol, is available as XOPENEX HFA Inhalation Aerosol. Each of the above four HFA propelled inhalers is a safe and effective replacement for CFC propelled generic albuterol inhalers but because all of the products are available only as brand name medications, they may be more costly to your patients. As a result, many patients have been slow to consider switching to the new inhalers. Several manufacturers of the HFA albuterol inhalers may offer discounts, coupons or rebates. The American Lung Association Lung Helpline at (800) LUNG-USA (option 2) has information about prescription assistance programs. Lastly, manufacturers of HFA inhalers have increased production so that there is an adequate supply of these products available now.

HFA propelled albuterol inhalers may feel, taste and smell different than the CFC propelled albuterol inhalers. Notably, your patient may comment that the force of the spray of an HFA propelled inhaler may feel softer and warmer than that of a CFC propelled inhaler. All HFA inhalers also require more frequent cleaning to prevent clogging. At least once a week, the patient should remove the metal canister and rinse the plastic part of the inhaler with warm water for about 30 seconds. It should be allowed to air dry thoroughly. In addition, each HFA propelled inhaler has different priming instructions. For example, before using the albuterol inhaler for the first time (or after two weeks of non-use), priming instructions call for three sprays for PROAIR HFA, four sprays for PROVENTIL HFA and VENTOLIN HFA. Priming for XOPENEX HFA inhalers requires four sprays if they haven't been used for more than three days. Therefore, it is important to read and understand the instructions that come with each of the HFA propelled albuterol inhalers before using.

The national transition from CFC propelled to HFA propelled albuterol inhalers is due to the Clean Air Act as well as the international environmental treaty called the Montreal Protocol on Substances that Deplete the Ozone Layer. Under this treaty, the United States has agreed to phase out production and importation of Ozone Depleting Substances (ODS) including CFCs. CFCs are safe to humans when they are used as propellants in inhalers. But, after a patient takes a puff of the inhaler, almost all of the CFC is immediately exhaled. The CFC then makes its way into the Earth's stratosphere, and reduces the amount of ozone available to protect the planet from the sun's harmful rays. Over time, the result of this is an increased risk of skin cancer, cataracts and other health problems. Several CFC propelled inhalers containing other medicines have already been phased out. Over the next several years, other CFC propelled inhalers will be phased out as well [e.g., Combivent (albuterol plus ipratropium)].

References:

Anon. *Phase-out of albuterol CFC inhalers*. Pharmacist's Letter/Prescriber Letter 2008; 24 (7): 240708.

Anon. FDA Public Health Advisory. *National Transition from Chlorofluorocarbon (CFC) Propelled Albuterol Inhalers to Hydrofluoroalkane (HFA) Propelled Albuterol Inhalers*. May 30, 2008. Internet: http://www.fda.gov/cder/drug/advisory/albuterol_cfc.htm.

Thompson, Cheryl A. *Sales End in Seven Months for Old-Style Albuterol Inhalers*. ASHP. May 30, 2008. Internet: http://www.ashp.org/s_ashp/article_news.asp.

Anon. *What you should know about HFA inhalers*. Pharmacist's Letter/Prescriber Letter 2007; 23 (11): 231108.

Diabetic Supplies to Be Assigned Formulary Status

Effective Jan. 1, 2009, diabetic supplies will be assigned a formulary status for insured non-HMO and HMO groups with two to 150 members. This formulary status will change the way coverage for diabetic supplies is determined for members of these insured groups. The following glucose meters will be available to members at no additional charge and the test strips for these meters will be formulary products, available at the formulary brand payment amount:

- Accu-Chek® Compact Plus® System
- Accu-Chek® Aviva™
- FreeStyle® Life
- FreeStyle Flash®
- FreeStyle Freedom®
- Precision Xtra™

Members who are not currently using one of these meters can contact the manufacturer to request one. Test strips for other meters will not be available at the formulary brand payment amount. The Accu-Chek meters can be ordered by calling (888) 355-4242. FreeStyle and Precision meters can be ordered by calling (866) 224-8892. For more information about these glucose meters, members can visit www.bcbsil.com, log in to Blue Access® for Members, and click on the My Coverage tab.

Diabetic supplies include blood glucose test strips, urine reagents, injectable glucagon, lancets and oral glucose tablets. Although some diabetic supplies are over-the-counter products, members must present a prescription along with their member ID card to receive coverage. Otherwise, the member will be responsible for the full retail cost.

Note: Third party brand names are the property of their respective owners.



Attention: Multi-specialty Groups

This month we will be sending letters to all multi-specialty groups who have performing providers in the group that are not listed as part of our network. Many of our accounts require that the National Provider Identifier (NPI) of the performing provider be entered on the claim. It is especially important that we have this information when processing claims for members belonging to out-of-state Blue Cross and Blue Shield plans.

Although we issue payment to your group as a participating provider when billed under your Tax ID Number, we need the performing provider's NPI to remain compliant with our account contracts.

In order for us to keep our files accurate, we are requesting that you provide us with the following information on your group's letterhead for all performing providers associated with your group:

- Group Tax ID Number
- Group License Number
- Name of each Performing Provider
- Type 1 NPI of each Performing Provider
- Practicing Address of each Performing Provider

This information can be sent to us via mail or fax.

MAIL

BLUE CROSS BLUE SHIELD OF ILLINOIS
PO BOX 975
CHICAGO IL 60690-0975

FAX: (312) 856-9359

ATTENTION: Provider Services

If you have any questions, please contact Provider Services at (312) 653-5888.

Type of Review is Key to Provider Review Form Processing

When submitting inquiries on the Provider Review Form, it is important to check the correct Type of Review box. For example, the ClaimCheck box should only be marked by professional providers requesting a ClaimCheck review. Facility providers should not check the ClaimCheck box at all.

It is also important to note that you must check one of the boxes in the Type of Review section. If no box is checked, or if an incorrect box is checked, processing of the inquiry will be delayed.

The Provider Review Form is available in the Forms section of our Provider Library at www.bcbsil.com/provider.

Take Advantage of These Green Solutions

Have you considered enrolling for Electronic Funds Transfer (EFT), the Electronic Remittance Advice (ERA) and Electronic Payment Summary (EPS)?

EFT allows your BCBSIL payments to be directly deposited into your bank account. The companion to the EFT is the ERA, which explains benefit payments for BCBSIL, showing how claims are paid and processed. The EPS is an electronic print image of the Provider Claim Summary (PCS) and provides the same payment information you currently receive on your paper PCS.

The advantage of the ERA and EPS is that the payment information is received in your office the day after the claims have been finalized. The EPS provides you the same search and print advantages once you download the file. While the EPS cannot be a stand alone document, it can be delivered with the ERA directly to the Receiver ID of your choice. The EPS is a text file which can be downloaded and saved on a CD.

For more detailed information and to get started with EFT, ERA and EPS, visit the Electronic Commerce section of our Web site at www.bcbsil.com. Click on *Electronic Funds Transfer (EFT)* / *Electronic Remittance Advice (ERA)* to access the enrollment forms. You may also call our Electronic Commerce Center at (800) 746-4614 for further assistance.

New Inactivity Standards for NDAS Online Accounts

BCBSIL has begun efforts to minimize the risk surrounding external access to our systems. The new inactivity standard for provider accounts is 400 days. BCBSIL feels this timeframe is acceptable for the usage of provider user accounts. Below are the details of this new standard:

- If a provider account is not used within 370 days, the account will be given administrative suspended status. The user then will need to call the Nebo Help Desk at (630) 916-3200 to have their ID reset and access reinstated.
- If the user fails to log in an additional 30 days for a total of 400 days, the account will become terminated. The user will no longer be able to access their account and must call the Nebo Help Desk at (630) 916-3200 to have a new ID created.



The PTC is at Your Service

If you do not have access to NDAS Online, you may call our Provider Telecommunications Center (PTC) at (800) 972-8088 for claim status, benefits and eligibility information for BCBSIL members.* Our easy-to-use Interactive Voice Response (IVR) system is available Monday through Friday, 6 a.m. to 11:30 p.m., and Saturday, 6 a.m. to 3 p.m. CT.

The PTC can also assist you with the following topics:

- **Product information**
- **Claims review requests**
- **Claims address**
- **Checks or vouchers**
- **Updating your provider file**
- **Fee analysis**
- **Predetermination of benefits**
- **Other general questions**

For complete IVR caller guides and other helpful resources, please visit the Provider Library section of our Web site at www.bcbsil.com and click on Interactive Voice Response System (IVR).

***Note:** For out-of-state member benefits and eligibility, contact the BlueCard hotline at (800) 676-BLUE (2583).

EFT Holiday Schedule

Although it is possible for providers to receive Electronic Funds Transfer (EFT), transmit Electronic Media Claims (EMC) and retrieve payment reports at almost any time during the year, it is important to keep in mind that corporate and legal banking holidays delay EFT and claims processing. The following schedule is for EFT, system and payment report availability for the remaining holidays in 2008 and through January 2009.

BCBSIL and Legal Banking Holidays

| Holiday | BCBSIL Holiday | Legal Banking Holiday |
|-------------------------|----------------|-----------------------|
| Veterans Day | Not Observed | Nov. 11, 2008 |
| Thanksgiving Day | Nov. 27, 2008 | Nov. 27, 2008 |
| Day after Thanksgiving | Nov. 28, 2008 | Not Observed |
| Christmas Eve | Dec. 24, 2008 | Not Observed |
| Christmas Day | Dec. 25, 2008 | Dec. 25, 2008 |
| New Year's Day | Jan. 1, 2009 | Jan. 1, 2009 |
| Martin Luther King, Jr. | Jan. 19, 2009 | Jan. 19, 2009 |

EFT Payment Schedule

| Claims Processed | File Sent to Bank | EFT Payment Available |
|------------------|-------------------|-----------------------|
| Nov. 10, 2008 | Nov. 12, 2008 | Nov. 14, 2008 |
| Nov. 11, 2008 | Banking Holiday | Nov. 14, 2008 |
| Nov. 26, 2008 | Dec. 1, 2008 | Dec. 3, 2008 |
| Nov. 27, 2008 | Closed | |
| Nov. 28, 2008 | Closed | |
| Dec. 23, 2008 | Dec. 26, 2008 | Dec. 30, 2008 |
| Dec. 24, 2008 | Closed | |
| Dec. 25, 2008 | Closed | |
| Dec. 31, 2008 | Jan. 2, 2009 | Jan. 6, 2009 |
| Jan. 1, 2009 | Closed | |
| Jan. 19, 2009 | Closed | |

Electronic Data Interchange (EDI) System and Report Availability Schedule

| Claims Received Date | | Holiday Observed | rEDI-link Blue | |
|----------------------|-------------------------|------------------|----------------|---------------|
| Processed Date | Payment Reports | | | |
| Nov. 26, 2008 | Business Day | Regular Hours | Nov. 26, 2008 | Nov. 27, 2008 |
| Nov. 27, 2008 | Thanksgiving Day | Regular Hours | Closed | |
| Nov. 28, 2008 | Day after Thanksgiving | Regular Hours | Closed | |
| Dec. 1, 2008 | Business Day | Regular Hours | Dec. 1, 2008 | Dec. 2, 2008 |
| Dec. 23, 2008 | Business Day | Regular Hours | Dec. 23, 2008 | Dec. 24, 2008 |
| Dec. 24, 2008 | Christmas Eve | Regular Hours | Closed | |
| Dec. 25, 2008 | Christmas Day | Regular Hours | Closed | |
| Dec. 26, 2008 | Business Day | Regular Hours | Dec. 26, 2008 | Dec. 29, 2008 |
| Jan. 1, 2009 | New Year's Day | Regular Hours | Closed | |
| Jan. 2, 2009 | Business Day | Regular Hours | Jan. 2, 2009 | Jan. 3, 2009 |
| Jan. 19, 2009 | Martin Luther King, Jr. | Regular Hours | Closed | |
| Jan. 20, 2009 | Business Day | Regular Hours | Jan. 20, 2009 | Jan 21, 2009 |

BCBSIL will be closed on all observed holidays. Claims "received" during these holidays will be "processed" the following business day. Payment reports, such as ERA and EPS, for claims processed on a business day following the holiday will be available for retrieval the next business day.

Regular Hours:

rEDI-link Blue System: Available Monday - Sunday, 24 hours a day, seven days a week.
 Provider Terminal System (PTS) Online: Monday - Friday, 6 a.m. to 11:45 p.m.; and Saturday, 8 a.m. to 3:30 p.m.

Note: Customers will receive EMC real-time reports on the day of transmission. For Availity's holiday schedule, please visit their Web site at www.availity.com or contact them at (800) AVAILITY.

View Managed Care Updates Online

HMO and BlueChoice Updated Policies and Procedures

On a monthly basis, we post updated policies and procedures on our Web site under "Updates." Go to www.bcbsil.com/provider to view the updated policies.

HMO and BlueChoice

Appointment/Reappointment Report

On a monthly basis, we post a report of the Appointed and Reappointed providers on our Web site. To access this report, go to www.bcbsil.com/provider. Select "Appointed/Reappointed PCPs/PSPs" under the Credentialing/Contracting section. The cumulative data is updated by the third Wednesday of each month.

BlueChoice Updated Depart List

A listing of all specialists no longer participating in the network for the BlueChoice product can be found at www.bcbsil.com/provider/securedpage.htm. Note: You can find participating specialists for the BlueChoice product on our Provider Finder® at www.bcbsil.com.

Your NPI Must Appear in iEXCHANGE Drop-Down Listings

In preparation for iEXCHANGE enhancements, providers should begin updating their "submitting" and "frequently used" provider drop-down listings to include the NPI (National Provider Identifier), if an NPI is not already displayed in the drop-down listing.

On November 16, 2008, the iEXCHANGE enhancements will be installed, and transactions will no longer be able to be submitted to providers who do not have an NPI recorded in their drop-down listing.

If you have questions, please contact the iEXCHANGE Help Desk at (312) 653-3399.

Centegra Health System Companies Adopt Assumed Names

Effective August 21, 2008, Centegra Northern Illinois Medical Center and Centegra Memorial Medical Center formerly adopted assumed names. The new names for these organizations are as follows:

- Centegra Memorial Medical Center will do business as: **Centegra Hospital – Woodstock**
- Centegra Memorial Medical Center, South Street will do business as: **Centegra Specialty Hospital – Woodstock, South Street**
- Centegra Northern Illinois Medical Center will do business as: **Centegra Hospital – McHenry**

We are in the process of revising the Centegra listings in the Provider Finder® section of our Web site. Individual physicians affiliated with Centegra can still be found via a name search within our online Provider Finder.

Visit us online at www.bcbsil.com/provider

Have an idea for an article?

We want to hear from you! Let us know if *Blue Review* continues to meet your standards.

Does this publication address your needs? What topics would you like to read about?

BCBSIL's success is dependent on your business as a contracting provider. *Blue Review* has been created to communicate tools, updates and tips to support your health care practice. Think of *Blue Review* as a canvas for your Blue Cross and Blue Shield business information.

We invite you to submit your feedback and suggestions for improvements via e-mail, to blureview@bcbsil.com.



Blue Review is a monthly newsletter published for Institutional and Professional Providers contracting with Blue Cross and Blue Shield of Illinois. We encourage you to share the content of this newsletter with your staff. *Blue Review* is located on our Web site at www.bcbsil.com/provider.

The editors and staff of *Blue Review* welcome letters to the editor. Address letters to:

Blue Review

Blue Cross and Blue Shield of Illinois
300 E. Randolph Street - 25th Floor
Chicago, Illinois 60601-5099

Email: blureview@bcbsil.com

1-312-653-4019, or fax 1-312-938-8021

Web site: www.bcbsil.com/provider.

Publisher:

Stephen Hamman, VP, Network Management

Editor:

Gail Larsen, DVP, Provider Relations

Managing Editor:

Jeanne Trumbo, Sr. Manager

Editorial Staff:

Margaret O'Toole, Marsha Tallerico
and Allene Walker

00014

A Division of Health Care Service Corporation, a Mutual Legal Reserve Company, an Independent Licensee of the Blue Cross and Blue Shield Association

For Contracting Institutional and Professional Providers

BLUEREVIEW

BlueCross BlueShield of Illinois | Experience. Wellness. Everywhere.™



PRSR STD
U.S. POSTAGE
PAID
PERMIT NO. 581
CHICAGO, IL