



# CAREFIRST UPDATES

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*Maryland AAHAM*

MARCH 2021

**Proprietary and Confidential**

# AGENDA

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1. Government Programs Overview
  - Medicare Advantage
  - Acquisitions of Medicaid and Medicare Advantage Plans
2. Networks
3. Pre-service Review
4. Coronavirus (COVID-19) Response
5. CareFirst Updates

# MEDICARE ADVANTAGE

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*HMO Network*



Launched January 1, 2021

## 2 HMO Plans

### CareFirst BlueCross BlueShield Advantage Core (HMO)

Our Core plan covers all your Medicare covered benefits, prescription drug coverage and additional benefits like dental, vision, fitness and more all at a low premium.

### CareFirst BlueCross BlueShield Advantage Enhanced (HMO)

Our Enhanced plan is packed with additional benefits beyond Medicare with no to low copays. This plan also offers a few extra benefits beyond the Core plan like routine chiropractic, acupuncture and podiatry. Members of this plan can also enroll in our Dental and Vision Add-On.

Annual  
Enrollment  
Period

October  
15

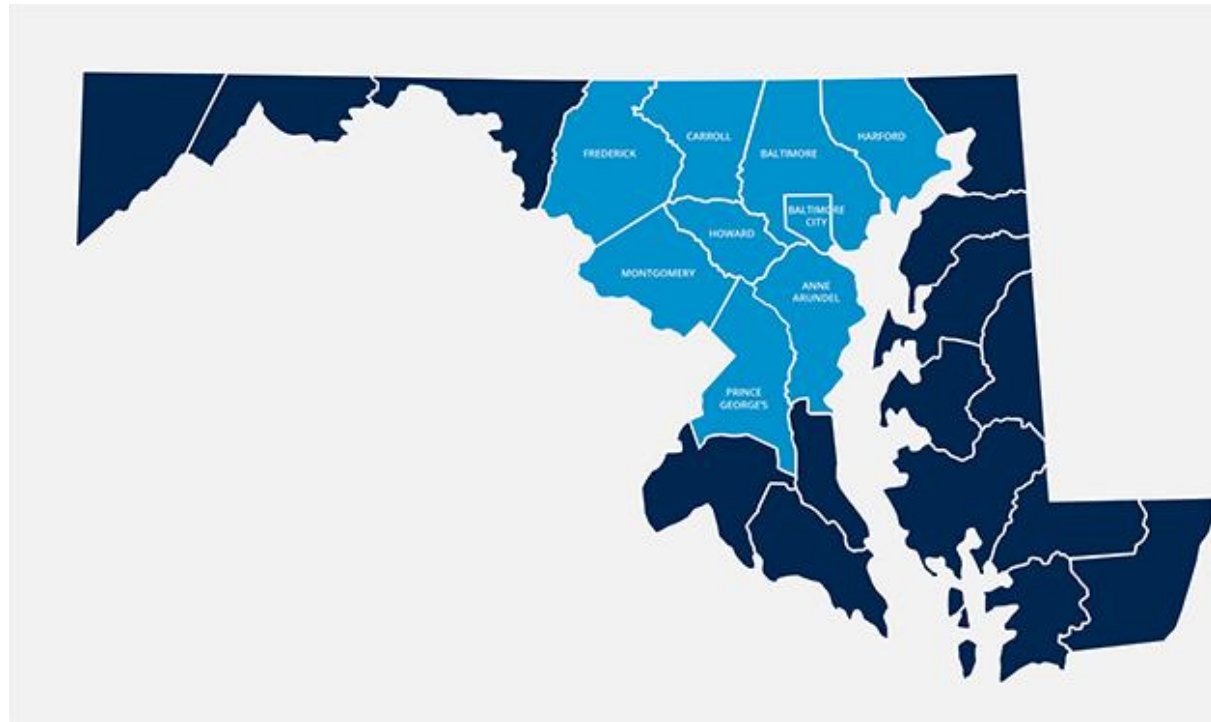


December  
7

## Service Area

CareFirst offers Medicare Advantage coverage to residents of the following Maryland counties:

- Anne Arundel
- Baltimore
- Baltimore City
- Carroll
- Frederick
- Harford
- Howard
- Montgomery
- Prince George's



**As network and membership expands, the service area could expand as well.**

## Network Information



At this time, the CareFirst BlueCross BlueShield Medicare Advantage network is closed.



There may be a time in the future when CF will seek to add providers to the network and will make that determination in conjunction with CMS regulations and network adequacy requirements.



Providers who are participating in the CareFirst BlueCross BlueShield Medicare Advantage Network are specifically and separately contracted with that network.



Being a CareFirst contracted provider does not automatically make you an in-network MA provider.

# Medicare Advantage



## CareFirst BlueCross BlueShield Advantage Core (HMO)



### Medicare Advantage

Member Name	PCP Office Visit:	\$00
<b>L L Smith</b>	Specialist Office Visit:	\$00
Member ID Number	Urgent Care Center Visit:	\$00
<b>MAC XXXXXXXXX</b>	Emergency Room Visit:	\$00

Group Number	<b>99-9999X</b>	RxBIN	<b>004336</b>
Effective Date	<b>01/01/2021</b>	RxPCN	<b>MEDDADV</b>
BC/BS Plan Codes	<b>193</b>	RxGRP	<b>RX8181</b>
Issuer	<b>(80840)</b>		
PCP Provider Name			

CMS-H6067-999



[www.carefirst.com/medicare](http://www.carefirst.com/medicare)

#### CareFirst BlueCross BlueShield Advantage Core (HMO)

**Medical Claim Submission Address for CareFirst Service Area Providers**  
CareFirst Medicare Medical Claims  
PO Box 4495  
Scranton, PA 18505

**Rx Claims Submission Address**  
CareFirst Medicare  
PO Box 52000  
Phoenix, AZ 85072-2000

**Dental Claims Submission Address**  
CareFirst Medicare Dental Claims  
PO Box 14115  
Lexington, KY 40512

Please reference member self-service for Vision and Hearing Aid Claims submission(s)

#### Member Self Service

Member Services: **1-855-290-5744**  
Pharmacy Services: **1-888-970-0917**  
Medical Emergency: **911**  
TTY/TDD: **711**  
24/7 Nurse Line: **1-833-968-1773**

**Medical Professional & Hospital Providers:**  
Toll-free Precertification: **1-866-773-2884**  
File claims with local Blue Cross and/or Blue Shield Plan

**PROVIDERS MUST NOT BILL MEDICARE.**  
MA HMO products provided by CareFirst Advantage, Inc., an independent licensee of the Blue Cross and Blue Shield Association. The member only has coverage for urgent and emergent care and renal dialysis outside of CareFirst Inc. Service area.

CareFirst BlueCross BlueShield Medicare Advantage is the business name of CareFirst Advantage, Inc., an independent licensee of the Blue Cross and Blue Shield Association. BLUE CROSS®, BLUE SHIELD® and the Cross and Shield Symbols are registered service marks of the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield Plans.

Pharmacy services provided by CVS Caremark

## CareFirst BlueCross BlueShield Advantage Enhanced (HMO)



### Medicare Advantage

Member Name	PCP Office Visit:	\$00
<b>L L Smith</b>	Specialist Office Visit:	\$00
Member ID Number	Urgent Care Center Visit:	\$00
<b>MAC XXXXXXXXX</b>	Emergency Room Visit:	\$00

Group Number	<b>99-9999X</b>	RxBIN	<b>004336</b>
Effective Date	<b>01/01/2021</b>	RxPCN	<b>MEDDADV</b>
BC/BS Plan Codes	<b>193</b>	RxGRP	<b>RX8181</b>
Issuer	<b>(80840)</b>		
PCP Provider Name			

CMS-H6067-999



[www.carefirst.com/medicare](http://www.carefirst.com/medicare)

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**Dental Claims Submission Address**  
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Pharmacy services provided by CVS Caremark

## New Authorization Portal



On-Demand training module is available in our Learning Library

CareFirst  Provider

Log Out

HOME CAREFIRST DIRECT PRIOR AUTH / NOTIFICATIONS TOOLS PROGRAMS/SERVICES RESOURCES MANUALS AND GUIDES

### Prior Auth / Notifications

#### Medical (Commercial / FEP)

Inpatient Authorization (Inpatient Notification)  
Outpatient Authorization (Medical Prior-Authorization)  
Genetic Testing (FEP only)

Start Now

Learn more...

#### Pharmacy (All Lines of Business)

Specialty Drug Authorization  
Pharmaceutical Authorization

Start Now

[Instructions](#)

Learn more...

#### Medical (Medicare Advantage)

Inpatient Authorization (Inpatient Notification)  
Outpatient Authorization (Medical Prior-Authorization)  
Genetic Testing (Medicare Advantage only)

Start Now

Learn more...

#### Genetic Testing (Commercial)

Start Now

Learn more...

#### Medical (DC Medicaid)

Login to DC Medicaid Provider Portal

Start Now

Learn more...

#### BlueCard (Out of Area)

Enter Prefix ?

Start Now

Learn more...

#### What requires an Authorization?

Medical

Medical Policy

Pre-Cert/Pre-Auth (In-Network)

Pre-Cert/Pre-Auth (Out-of-Area)

Pharmacy

Pharmacy Exception Requests

Pharmacy Resources

Pharmacy Prior Authorization

Other Resources

Medical Forms

Medical News

On Demand Training

Although the Altruista authorization portal is currently only effective for Medicare Advantage members, Altruista will eventually be used for all commercial member authorizations.

# ACQUISITIONS

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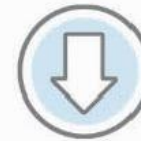
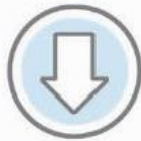
*Medicaid and Medicare Advantage Products*

## UMMS Health Plans

In October 2020, it was announced that CareFirst BlueChoice, Inc. will acquire University of Maryland Health Advantage, Inc. (UM Health Advantage), a Medicare Dual Eligible Special Needs health plan, and University of Maryland Health Partners, Inc., a Medicaid Managed Care Organization.

## Trusted Health Plan

In January 2020, CareFirst BlueCross BlueShield announced the acquisition of Trusted Health Plan (District of Columbia), Inc. (THP). Now, THP will be called CareFirst Community Health Plan District of Columbia. More information on this plan is available at <https://www.carefirstchpdc.com/>



## ID Cards

University of Maryland Medical System plan members were issued new ID cards with CareFirst branding on February 1st.



### Community Health Plan Maryland

Member Name  
**JANE DOE**  
Member ID

PCP First Name, Last Name  
PCP Group Name  
PCP Phone Number

Effective Date:  
DOB:  
Sex:

RxBin:  
RxPCN:  
RxGroup: Rx4209



### Medicare Advantage

Member Name

**CareFirst Dual Prime HMO-SNP**  
**CMS-H8854-PBP 002**

Member ID Number

Effective Date **01/01/2021**  
Issuer **80840**  
PCP

RxBIN **004336**  
RxPCN **MEDDADV**  
RxGRP **Rx8575**

 MedicareRx  
Prescription Drug Coverage

 MEDICARE  
ADVANTAGE | HMO

## Additional Information



As a provider there will be no changes related to claims, authorizations, customer service or credentialing



University of MD Health plans have new website addresses effective February 1, 2021.



**CareFirst BlueCross BlueShield Community Health Plan Maryland**  
[carefirstchpmd.com](https://carefirstchpmd.com)

**CareFirst BlueCross BlueShield Medicare Advantage**  
[carefirst.com/mddsnp](https://carefirst.com/mddsnp)

For provider services, please continue contacting the health plan in the following ways:  
Provider line at 410-779-9359, 800-730-8543, or email [ProviderMD@CareFirst.com](mailto:ProviderMD@CareFirst.com)

## ID Cards

CareFirst CHPDC Cards are issued to DC Healthy Family Program (DCHF) and DC Healthcare Alliance enrollees.



### DC Healthy Families



GOVERNMENT OF THE  
DISTRICT OF COLUMBIA  
MURIEL BOWSER, MAYOR

Enrollee Name  
**JANE DOE**  
Enrollee ID

CareFirst CHPDC Subscriber ID  
**D5C**

DOB:  
Sex:

PCP First Name, Last Name  
PCP Group Name  
PCP Phone Number

PDP First Name, Last Name  
PDP Group Name  
PDP Phone Number

RxBin: 610674  
RxPCN: ABARCA  
RxGroup: THPDC



Hospital or physicians: file claims with local BlueCross and/or BlueShield plan.

CareFirst BlueCross BlueShield Community Health Plan District of Columbia is an independent licensee of the Blue Cross and Blue Shield Association. The Blue Cross® and Blue Shield® and the Cross and Shield Symbols are registered service marks of the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield Plans.

**A B A R C A**

Pharmacy services provided through ABARCA on behalf of CareFirst BlueCross BlueShield Community Health Plan District of Columbia.


### [www.carefirstchpdc.com](http://www.carefirstchpdc.com)

Enrollee Services: M-F 8 a.m.–5:30 p.m. **202-821-1100**  
Toll free: **855-326-4831, 711 TTY**  
Nurse Advice Line: 24 hours/7 days, **855-872-1852**  
Prior Authorizations: **855-326-4831**  
Abarca & After-Hour Prescriptions: **866-287-6156**  
MTM Transportation Services: **855-824-5693**  
Economic Security Administration (ESA): **202-727-5355**

### Medical Claims Submission Information for Local Providers

**CareFirst Community Health Plan  
District of Columbia  
P.O. Box 830786  
Birmingham, AL 35283-0786  
Electronic Payer ID: L0230**

## Prior Authorization Requests Added

 **Medical (DC Medicaid)**

Login to DC Medicaid Provider Portal

[Start Now](#) [Learn more...](#)

**Medical (DC Medicaid)**

For DC Medicaid CareFirst Community Health Plan, DC (CHPDC) members only


DC Medicaid Participating Providers  
Click [Start Now](#) to be transferred to the CareFirst CHPDC Provider Portal Login page

Non-participating or out of area DC Medicaid Providers  
Medical Authorization request forms can be found [here](#) by scrolling down to the **Medical Authorizations** section


Having trouble? Contact DC Medicaid Utilization Management Department at 202-821-1132

[Close](#)

The '[Start Now](#)' link will take users to the CHPDC Provider Portal login page to complete a prior authorization request.

  
Community Health Plan  
District of Columbia

Welcome to the CareFirst CHPDC Provider Portal, a unique online tool for accessing benefit, eligibility, and claims data.



**Login**

Username

Password

[Log In](#)

[Forgot username or password?](#) | [Create an Account](#)

**Need a username and password?**  
[Proceed to our sign up process](#)

## Eligibility Added

Providers can verify eligibility for CHPDC members in CareFirst Direct.

*Benefits for members of CareFirst Community Health Plan are unavailable at this time. Please review the benefits information in the CareFirst Community Health Plan [manual](#).*

Eligibility / Benefits & Claims Status
Remittance / NOP
Fee Schedules

Back
Eligibility Summary


Date of Service
02/26/2021
Update

TEST, OTHERS
DOB: 03/02/1977 (43 yrs) Female
Member ID:
Primary Language: N/A

Medical 1000
Dental 1000
Vision 1000
Pharmacy 1000

Group  
DC MEDICAID
Status  
Active Coverage  
08/01/2020 - 12/31/2999
Relationship to Policy Holder  
Self
more...

Insurance Type  
Medicaid
Plan Description  
CareFirst CHPDC Medicaid
Renewal Month ?  
Contract: N/A  
Benefit: Every January



Coordination of Benefits
Primary Care Physician (PCP)

No info on file
No info on file

Disclaimer  
Unless otherwise required by state law, this notice is not a guarantee of payment. Benefits are subject to all contract limits and

Benefits

Benefits for members of CareFirst Community Health Plan are unavailable on CareFirst Direct at this time.  
  
Please review the benefits information in the CareFirst Community Health Plan [manual](#).

I would like to

Prior Auth/Notifications  
Select One

16

# NETWORKS

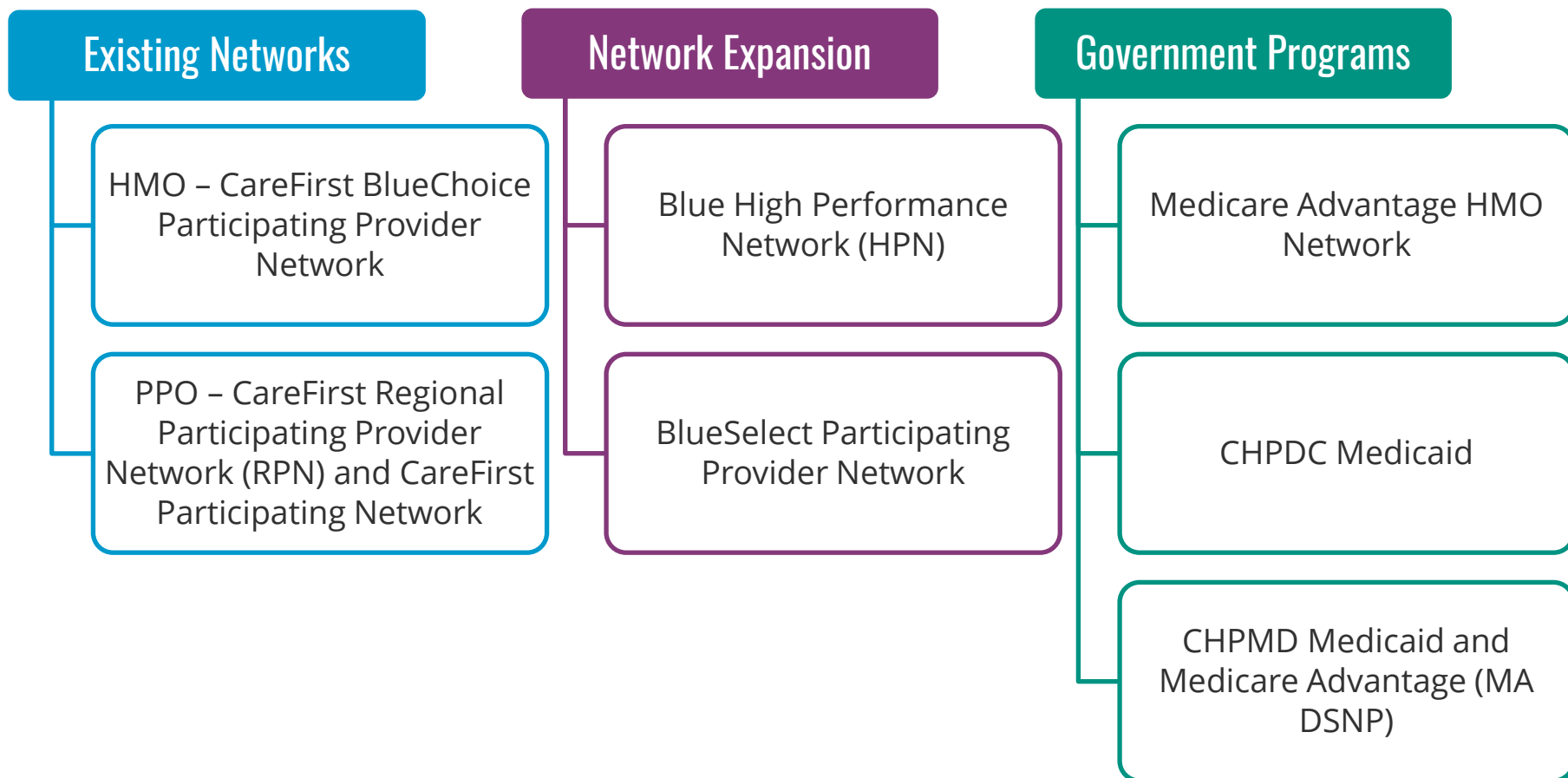
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*Network Expansion and Change*

## Our current networks

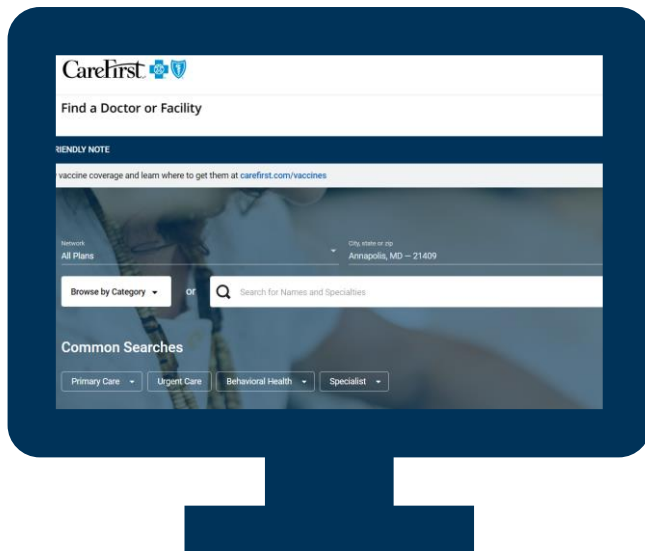


Participating with CareFirst does not mean you are participating with every network we have available.



## Verify your network

- As our networks expand, it is important that you are aware of the networks you are participating with. Your awareness will ensure CareFirst members are informed about any potential network-related out-of-pocket costs.



Participation Agreement(s) and  
Network Appendices

Find a Doctor Tool



Watch this video to learn  
how to check your networks  
using the Find a Doctor tool.

# PRE-SERVICE REVIEW

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*Radiology and Anesthesia Timeliness & Post Acute Placements*

## Anesthesia

- Entering anesthesia as a secondary CPT code for an authorization that would normally auto approve will cause delay
- The only time anesthesia should be entered on a case is if it is the primary CPT code such as for dental work, typically for children

### Example:

#### **Claim for colonoscopy**

- The CPT code auto-approves
- Adding a second line for anesthesia causes the authorization to pend
- This causes delays in processing



## Timeliness Review of Cases

Submit authorizations:



Prior to Date  
of Service to  
allow time for  
review

Review of requests are prioritized based on  
regulatory compliance standards:



Turnaround  
for MD/VA  
Risk when all  
clinical  
information  
received



Turnaround  
for other  
accounts/lines  
of business

# CORONAVIRUS (COVID-19) RESPONSE

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*New and continuous response to the pandemic*

## Billing and Submitting Claims for the COVID-19 Vaccine



CareFirst members will pay \$0 for any authorized COVID-19 vaccine. Providers will be reimbursed by CareFirst for administration of a vaccine.



Submit claims for administration of the vaccine using codes:

0001A, 0002A for Pfizer

0011A, 0012A for Moderna

0031A for Johnson & Johnson



The vaccine is paid for by the federal government. Providers should not submit claims for the cost of the vaccine.

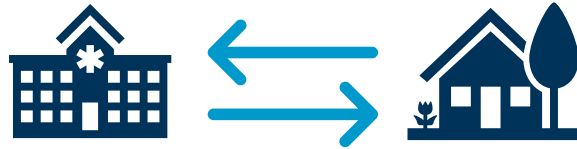


Applies self-insured and fully-insured members



Providers who administer a COVID-19 vaccine for a Medicare Advantage member will need to bill Medicare directly for those costs.

Effective February 1, 2021



- CareFirst will cover remote physiologic monitoring for patients discharged from an inpatient facility or emergency room where a diagnosis of heart failure, chronic hypertension, chronic obstructive pulmonary disease, chronic kidney disease, or COVID-19 is on the claim.
- Remote patient monitoring must be ordered within 60 days of the patient's discharge date or emergency room visit and requires a prescription from either the discharging provider or the patient's primary care or specialty care provider.

Detailed information, including a list of diagnoses covered, is available in our [Medical Policy Reference Manual](#), medical policy number 2.01.084 Remote Patient Monitoring.

Visit [www.carefirst.com/bettertogetherpledge](http://www.carefirst.com/bettertogetherpledge)

## We Pledge To Protect The Health Of Our Communities

### 1. We will continue to prioritize health and safety.

As community leaders, we have implemented innovative methods to keep our employees safe throughout the pandemic. Now, it is our collective responsibility to play our part in this historic national vaccine effort.

### 2. We will listen and communicate openly, regularly and with empathy.

By actively listening and thoughtfully discussing the critical role vaccines play, addressing concerns, fears and hesitancy related to being vaccinated, we can help those we are responsible for prepare to take the next step when it is their turn.

### 3. We will lead by example.

Our individual choices matter. The people we are responsible for appropriately expect each of us to set a good example on important issues. As community leaders, it is our responsibility to do our part, to use our resources for the greater good and to step forward together.

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**Sign The Pledge By March 31**

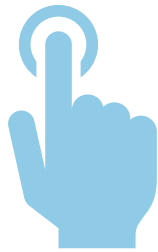
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**THIS IS OUR SHOT TO LEAVE COVID BEHIND.**

Visit [www.carefirst.com/bettertogetherpledge](http://www.carefirst.com/bettertogetherpledge)

## \$1000 per organization up to \$1 million

- On behalf of each organization signing the pledge by March 31, 2021, CareFirst will contribute \$1,000 (up to \$1M) to directly support the vaccination efforts of several community partners.



**Sign the pledge today!**



**Spread the word!**

# CAREFIRST UPDATES

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## 9 Years Running!

CareFirst is one of 132 companies worldwide, and one of only four health insurance companies to receive this honor. 2021 marks the ninth consecutive year CareFirst has received this distinctive award.





In compiling this year's list, Ethisphere scored nominees in five key categories, including:

- Ethics and compliance program
- Corporate citizenship and responsibility
- Culture of ethics
- Governance
- Leadership and reputation

## Effective Jan 1, 2021 – Prefix PJN

- Effective Jan. 1, 2021 JHU members have a new plan. These members are now covered under the BC Advantage with PPO overlay. Under this plan members can go to a PPO provider and receive in-network benefits within the CareFirst service area.
- This also means that members have the flexibility to use PPO lab and radiology providers without the restrictions of the BlueChoice product.

### ID Card Example

			<a href="http://www.carefirst.com">www.carefirst.com</a>
Member Name <b>DOE JOHN</b>	<b>PREFERRED PROVIDER OPTION</b>	This employee benefit plan provides benefits to you and your eligible dependents.	<b>Customer Service:</b> 833-229-9496 <b>Provider Service:</b> 877-228-7268
Member ID <b>PJN</b>		CareFirst BlueCross BlueShield provides administrative claims payment services only and does not assume any financial risk or obligation with respect to claims.	Mental Health/Substance Abuse: <b>800-245-7013</b> 24hr First Help(Nurse): <b>800-535-9700</b> Pre-Auth/Case Management: <b>866-773-2884</b> Locate Out of Area Providers: <b>800-810-2583</b>
Group		LV1 PPO and CareFirst HMO LV2 Out of Network	All claims should be filed to the local plan. Local CareFirst providers mail to: <b>Mail Administrator</b> <b>PO Box 14115 (for claims)</b> <b>PO Box 14114 (for correspondence)</b> <b>Lexington, KY 40512</b>
Eff Date <b>01/01/21</b>	<b>DED 3500</b>	CareFirst BlueChoice, Inc. is an independent licensee of the Blue Cross and Blue Shield Association. The Blue Cross® and Blue Shield® and the Cross and Shield Symbols are registered service marks of the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield Plans.	
BC/BS Plan <b>190/690</b>		590100.JHU (11/20)	

## Effective January 1, 2021

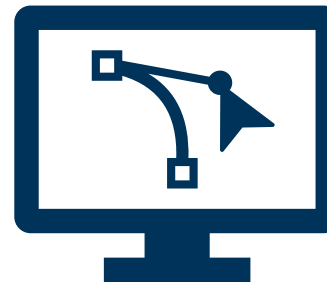
- Prior authorizations for MedStar employer group MHT should now be entered through CareFirst BlueCross BlueShield and CareFirst BlueChoice, Inc. (CareFirst) authorization systems.
- Providers will no longer be directed to contact Evolent Health for medical management activities.

## Coming Mid-2021! Commercial/FEP Altruista Authorization Portal

In Mid-2021, a new authorizations portal will be launched and providers will need to submit authorizations for Commercial and FEP members using Altruista Health



Live Webinars



On-Demand Trainings  
and Video Tutorials

Look for more communication on the launch in April and May.

## What's coming in 2021?



### Expanded on-demand library

- Relaunch of New Provider curriculum
  - Altruista Prior Authorizations training
  - Additional product training
  - BlueCard
- ...and more!



Do you have any questions or suggestions for future training? We want to hear from you!

Email us at [provided@carefirst.com](mailto:provided@carefirst.com) with your feedback.



# THANK YOU

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*For more information, contact*

YOUR PROVIDER RELATIONS REPRESENTATIVE