

BlueNewsSM for Providers



BlueCross BlueShield of South Carolina and
BlueChoice[®] HealthPlan of South Carolina

2025 Annual Provider Summit

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In My Insurance Manager

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2025 ANNUAL PROVIDER SUMMIT

For the past four years, BlueCross BlueShield of South Carolina conducted their Annual Provider Summit (APS) virtually due to the pandemic. We are happy to announce that this year's APS will be in person.

Our providers have been asking for this, and we are just as excited as you are. We will be holding six in-person summits at three separate locations. For planning purposes, the locations and dates are as follows:

- ▶ **Session 1** — 9 a.m. to noon
- ▶ **Session 2** — 1 p.m. to 4 p.m.

Dec. 2, 2024
Embassy Suites Golf Resort
670 Verdae Blvd.,
Greenville, SC 29607

Dec. 4, 2024
Trident Technical College,
Building 920
7000 Rivers Ave.,
North Charleston, SC 29406

Dec. 10, 2024
Richland Two Institute of Innovation
Conference Center
763 Fashion Drive,
Columbia, SC 29223



OTHER HEALTH INSURANCE IN MY INSURANCE MANAGER

Did you know you can find other health insurance information (OHI) for a member in My Insurance Manager?

If we have OHI on file for a member, that information can be verified in the portal using the following steps:

1. Hover over **Patient Care** and select **Other Health Insurance**.
2. Select the appropriate health plan and enter the member's ID and date of birth.
3. Select Continue.

If there is no OHI for the member, your results will indicate there is no OHI on file. If there is OHI, the details from the other health plan will be displayed.

Note: This information is only available for BlueCross BlueShield of South Carolina, BlueChoice® HealthPlan of South Carolina and Healthy BlueSM members. Healthy Blue is offered by BlueChoice HealthPlan.

Other Health Insurance Printer-Friendly

| | |
|--|---|
| Insurance Plan Name: BlueCross BlueShield Plans Member ID: ZCZ065922516805 Member's Name: MICHAEL TESTING Change Patient | Coverage Information Status: Our records show no Other Health Insurance coverage information on file. Last Update: 04/24/2024 Expires: 04/24/2025 Medicare: Status: Our records show no Medicare coverage information on file. Ask Provider Services or BAC |
|--|---|



REQUESTING AUTHORIZATIONS FOR MEDICARE ADVANTAGE MEMBERS

Did you know that our Medicare Advantage plans have a separate authorizations process that is explained in detail **on our website**? You can find all the details you need to determine whether authorization is required and learn how to submit your requests.

We have several tools available for determining benefit requirements, such as the **voice response unit** or **My Insurance ManagerSM**. You can also refer to the available list of codes that require prior authorization on the Medicare Advantage authorization page.

You can make prior authorization requests by phone, by fax or online. When faxing your requests, send a separate request for each patient. Be sure to use the appropriate fax number to submit your request for medical services. The authorizations area has noticed many requests sent to the wrong fax number.

By using the appropriate number, you will avoid delays in the review process.

Ways to request prior authorization:

To authorize medical services, providers can complete prior authorization requests:

- ▶ Online: **My Insurance ManagerSM**
- ▶ Phone: 855-843-232
- ▶ Fax: 803-264-6552

To authorize behavioral health services, providers can complete prior authorization requests:

- ▶ Online: **www.CompanionBenefitAlternatives.com**
- ▶ Phone: 833-971-4075

Companion Benefit Alternatives Inc. is a separate company

that assists in management of behavioral health and substance abuse benefits on behalf of BlueCross. To authorize laboratory services with our laboratory network, Avalon, providers can complete prior authorization requests:

- ▶ Online: **Prior Authorization System (PAS) Portal.**
- ▶ Phone: 844-227-5769
- ▶ Fax: 813-751-3760

Avalon is an independent company that provides laboratory management services on behalf of BlueCross.

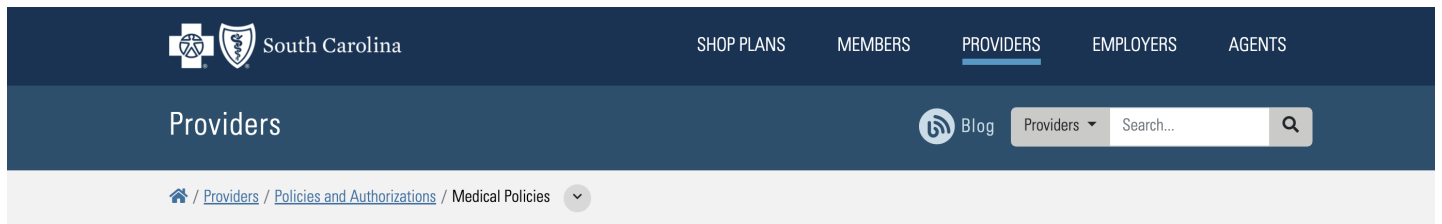
To authorize durable medical equipment (DME) used in a home setting, home health and home infusion services, providers can complete prior authorization requests:

- ▶ Phone: 844-215-4264
- ▶ Fax: 844-215-4265

MEDICAL POLICY UPDATES

BlueCross BlueShield of South Carolina frequently revises the medical policies used to make clinical determinations for a member's coverage.

Review the [latest medical policy updates](#). We strongly encourage you to visit the [Medical Policies and Clinical Guidelines](#) pages regularly to stay abreast of these changes and to read any policy in its entirety.



Medical Policies

Our medical policies include evidence-based treatment guidelines and address common medical situations. You can review our medical policies online any time. Please keep in mind that:

- These policies aren't medical advice and do not guarantee results or outcomes.
- These policies may change to stay up to date with current research and a posted policy may not reflect a recent change.
- These policies are shared for information only, but the health plan decides how they apply.
- These policies address situations that occur frequently and some situations may warrant further individual review.
- These policies may include services that are not covered under a specific health plan, so always verify eligibility and benefits.



UPCOMING WEBINARS

This year, we will host various webinars to provide further education to our provider community.

Below are the topics being presented this year.

- ▶ My Provider Enrollment Portal | Aug. 7, 2024
- ▶ My Provider Enrollment Portal | Nov. 6, 2024

All webinars are hosted through Microsoft Teams and are scheduled from noon – 1 p.m. You can [sign up](#) for any of the available sessions.

We look forward to your attendance.



BlueCross BlueShield of South Carolina and
BlueChoice® HealthPlan of South Carolina

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Benefits Disclaimer: The information listed is general information and does not guarantee payment. Benefits are always subject to the terms and limitations of specific plans. No employee of BlueCross BlueShield of South Carolina or BlueChoice HealthPlan of South Carolina has authority to enlarge or expand the terms of the plan. The availability of benefits depends on the patient's coverage and the existence of a contract for plan benefits as of the date of service. A loss of coverage, as well as contract termination, can occur automatically under certain circumstances. There will be no benefits available if such circumstances occur.

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