

# PROVIDER Blue

## Preventive Flu Vaccines

BlueCross BlueShield of South Carolina always wants its members to stay healthy. Since we are in the flu season, we encourage eligible members to get their flu vaccines to reduce the chance of infection.

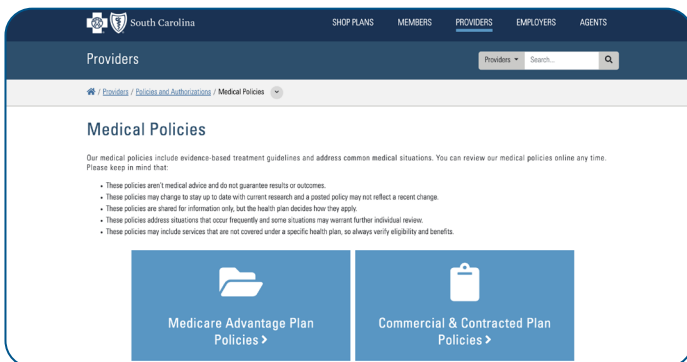
Members can get flu vaccines covered under their pharmacy benefit at any in-network pharmacy with no cost share. Those that choose to go to an out-of-network pharmacy will be responsible for the full cost.

**Who is covered?** Members that have nongrandfathered fully insured, self-insured and exchange plans are eligible for coverage.

**Covered Flu Vaccines:** The flu vaccines covered under this benefit include the following:

Afluria Quadrivalent	Flublok Quadrivalent	Flumist Quadrivalent Intranasal**
Fluad Quadrivalent*	Flucelvax Quadrivalent	Fluzone High-Dose PF*
Fluarix Quadrivalent	Flulaval Quadrivalent	Fluzone Quadrivalent

\*Only approved for those aged 65 years and older.  
 \*\*Only approved for those aged 2 - 49 years.



## Medical Policy Updates

BlueCross 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 up to date with these changes and to read any policy in its entirety.



## 2024 Annual Provider Summit

The 2024 Annual Provider Summit is quickly approaching. These workshops tell you about changes and new initiatives for the upcoming benefit year. This year, all sessions will be held virtually.

**The dates are:**

- November 28 – 30
- December 5 – 7
- December 12 – 14

All sessions will be from 9 a.m. – 1 p.m. [Register today](#) so you do not miss out.



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## Reminder: Medicare Advantage and Cotiviti

On Sept. 1, 2022, BlueCross' Medicare Advantage plans began working with Cotiviti. Cotiviti is a leader in payment accuracy for periodic reviews of paid medical claims.

Cotiviti uses Clinical Chart Validation (CCV) to conduct post payment audit validation in the review of inpatient claims. These reviews ensure proper billing and require a copy of medical records for the following inpatient services:

- Diagnosis Related Group (DRG)
- Observation (OBV)
- Readmission (RAD)

If a claim is identified for review, you will receive a letter identifying the claim(s) selected. Details related to the guidelines and time frames to submit the required medical records will follow.

If you have any questions about the CCV audits, please call Cotiviti Provider Services at 770-379-2325. They are available Monday through Friday from 8 a.m. to 5 p.m., EST.

