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PATHWAYS TO MANAGED CARE



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This issue:



Quarterly Data Verifications



BlueCare Tennessee

BlueCare Tennessee is an Independent Licensee of the BlueCross BlueShield Association.



Carrier Contact List

WellCare® Vendor Update

To Providers on behalf of Wellcare Tennessee:

All of us at Wellcare Tennessee (Wellcare) are committed to continuous improvement of quality services for our members. With that in mind, Wellcare has expanded its partnership with National Imaging Associates, Inc. (NIA)*, to implement a Musculoskeletal (MSK) Management program.

The current program requires prior authorization for non-emergent This program includes prior authorization for non-emergent MSK procedures for outpatient, interventional spine pain management services (IPM) specific to spinal cord stimulators; and inpatient and outpatient hip, knee, shoulder, lumbar and cervical spine surgeries for Wellcare Medicare members. This decision is consistent with industry-wide efforts to ensure clinically appropriate quality of care and to manage the increasing utilization of these services.

In consideration of the aforementioned agreement, Health Net Oregon will terminate its current MSK program and utilization management efforts with TurningPoint as of January 31, 2024.

Under terms of the agreement between Wellcare and NIA:

- Wellcare will oversee the MSK program and continue to be responsible for claims adjudication and medical policies.
- NIA will manage non-emergent outpatient interventional spine pain management services, and inpatient and outpatient MSK surgeries through the existing contractual relationships with Wellcare.

Planned for a January 31, 2024, implementation, this correspondence serves as notice under your Participating Wellcare Provider Agreement of changes to the program.

Providers may begin contacting NIA on February 1, 2024, to seek prior authorization for procedures scheduled on or after February 1, 2024.

The following outlines the specific procedures requiring prior authorization.

IPM Component: In addition to the current IPM procedures that require auth, you will need to get authorization for the following additional service:

- Spinal Cord Stimulators

MSK Surgeries: Prior authorization will be required for the following non-emergent inpatient and outpatient hip, knee, shoulder, lumbar and cervical surgeries:

Hip

- Revision/Conversion Hip Arthroplasty
- Total Hip Arthroplasty/Resurfacing
- Femoroacetabular Impingement (FAI) Hip Surgery (includes CAM/pincer & labral repair)
- Hip Surgery – Other (includes synovectomy, loose body removal, debridement, diagnostic hip arthroscopy, and extra-articular arthroscopy knee)

Knee

- Revision Knee Arthroplasty
- Total Knee Arthroplasty (TKA)
- Partial-Unicompartmental Knee Arthroplasty (UKA)
- Knee Manipulation under Anesthesia (MUA)
- Knee Ligament Reconstruction/Repair
- Knee Meniscectomy/Meniscal Repair/Meniscal Transplant
- Knee Surgery – Other (includes synovectomy, loose body removal, diagnostic knee arthroscopy, debridement with or without chondroplasty, lateral release/patellar realignment, articular cartilage restoration)

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Shoulder

- Revision Shoulder Arthroplasty
- Total/Reverse Shoulder Arthroplasty or Resurfacing
- Partial Shoulder Arthroplasty/Hemiarthroplasty
- Shoulder Rotator Cuff Repair
- Shoulder Labral Repair
- Frozen Shoulder Repair/Adhesive Capsulitis
- Shoulder Surgery – Other (includes debridement, manipulation, decompression, tenotomy, tenodesis, synovectomy, claviculectomy, diagnostic shoulder arthroscopy)

Lumbar

- Lumbar Microdiscectomy
- Lumbar Decompression (Laminotomy, Laminectomy, Facetomy & Foraminotomy)
- Lumbar Spine Fusion (Arthrodesis) With or Without Decompression – Single & Multiple Levels
- Sacroiliac Joint Fusion

Cervical

- Cervical Anterior Decompression with Fusion –Single & Multiple Levels
- Cervical Posterior Decompression with Fusion –Single & Multiple Levels
- Cervical Posterior Decompression (without fusion)
- Cervical Artificial Disc Replacement
- Cervical Anterior Decompression (without fusion)

KEY PROVISIONS:

- It is the responsibility of the ordering physician to obtain prior authorization for all interventional spine pain management procedures and MSK surgeries outlined above.
- NIA does not manage prior authorization for emergency MSK surgery cases that are admitted through the emergency room or for MSK surgery procedures outside of those procedures listed above.
- The ordering physician must obtain prior authorization with NIA prior to performing the surgery/procedure.
- Facility admissions do not require a separate prior authorization. However, the facility should ensure that an NIA prior authorization has been obtained prior to scheduling the surgery/procedure.

Services other than the interventional spine pain management and MSK surgeries outlined above will continue to follow Wellcare prior-authorization requirements for hospital admissions and elective surgeries.

We appreciate your support and look forward to your assistance in assuring that Wellcare members receive MSK services delivered in a quality, clinically appropriate fashion.

We will provide additional information as we get closer to the implementation date. Should you have questions at this time, [please contact Wellcare Provider Services Department at 1-833-444-9088](tel:1-833-444-9088).



Quarterly Data Verifications have been sent out for Q1 2024.

Please review and return this form if you have not already done so.

This data verification is required by CMS, and helps us ensure that we have accurate information in our credentialing system.



In May 2023, the **BlueCare Primary Care Provider (PCP) Change Maintenance** application in Availity was launched. You can read more about the application in the [May, June and July 2023 BlueAlert newsletters](#).

The application has been successful, averaging 200-300 PCP changes daily. Due to its success, the existing **PCP Change Request Form** is phasing out. Beginning **April 1, 2024**, providers will need to use the **BlueCare PCP Change Maintenance** application to change the PCP assignment for a member with BlueCare, TennCare Select or CoverKids coverage.

Please note: This only affects the PCP change process providers use. Members can still change their PCP by calling the Member Service line or through their member online account.

As a reminder, when you use the application, changes are made in real time. New ID cards are mailed to members automatically when the change is made, and digital ID cards are available immediately in the **BCBSTN** mobile app. For step-by-step instructions for using the new Availity application, review our quick reference guide in the **Resources** section of our **Payer Space**. If you have questions about using Availity, please call **(423) 535-5717, option 2**, or contact your eBusiness Regional Marketing Consultant.



Clearinghouse	Payer ID number
Availity®	PREHP
Nthrive	Z0003
Change Healthcare	05003
ClaimMD	PRESB

Or send paper claims to:

P.O. Box 27489
Albuquerque, NM 87125-7489

If an ASA member uses a transplant facility in our Institutes of Excellence™ network, the facility will use the Special Case Customer Service Unit for submitting claims.

Please note that neither Aetna® nor ASA can verify eligibility or process claims.

More information

To learn more, see our [ASA flyer \(PDF\)](#).

Check your Aetna Premier Care Network (APCN) status for 2025

[Use our provider referral directory to find out if you participate.](#)

Now is a good time to check our [provider referral directory](#) to see if you're participating in our APCN/APCN Plus) programs for 2025. If you have questions, visit our [Contact Aetna](#) page.

Notable 2025 APCN changes

- Utah: addition of High Performance Network

Notable 2025 APCN Plus changes

- Atlanta, GA: addition of the Emory Aetna Whole HealthSM Open Access Aetna Select to APCN Plus concentric
- Arizona: Banner|Aetna joint venture is adding Gila County
- Oregon: addition of Legacy Health Partners Aetna Whole HealthSM to APCN Plus concentric and multi-tier

Dallas, TX addition of Texas Health Aetna Whole HealthSM APCN Plus concentric and multi-tier

- Utah: addition of the Aetna Whole HealthSM Connected Utah to APCN Plus concentric
- NC Aetna Whole HealthSM networks: removal of the concentric style offering; multi-tier arrangements will remain

Overview of APCN/APCN Plus

APCN is a performance network for businesses with employees in locations across the country. With this network, employers can offer a single benefits design and simplified communications to all employees, regardless of their location.

APCN Plus concentric and multi-tier includes a combination of performance networks across the country, but also includes Accountable Care Organizations (ACOs) and joint ventures (JVs) in certain areas. Members in these networks will have APCN Plus and the name of the ACO/JV on their ID card for identification.

The Aetna Premier Care Network Plus program is now multi-tiered

Starting January 1, 2024, some of your patients might be in our new Aetna Premier Care Network Plus Multi-Tier program. This program is a new national performance network offering. Multi-tiered programs sort doctors and facilities into tiers based on their performance and ability to save money. The highest performing and most efficient doctors and facilities are in Tier 1.

How to identify patients who in the multi-tier program

The member ID card will say “Aetna Premier Care Network Plus Multi-Tier.”



Find out whether you participate and what tier you are in

To check your participation and tier status, visit our [provider referral directory](#). If a hospital or provider does not participate with Aetna®, it will not appear in the search results.

You can also find out whether you are participating or not participating by looking at the “limitations” section of a transaction.

Tier 1 participation

- Tier 1 hospitals and providers will see “maximum savings” displayed.
- This tier is the APCN Plus network, which is covered at the highest benefits level.

Tier 2 participation

- Tier 2 hospitals and providers will see “standard savings” but could see both “maximum savings” and “standard savings if both a hospital and doctors are included under the same tax ID (this is referred to as having a “mixed participation” status).
- This tier is Aetna’s broad network of providers and is covered at a reduced benefits level. Most doctors and hospitals not designated as Tier 1 but contracted with Aetna’s broad network will be covered at the Tier 2 benefits level.

Out of network

- If a hospital or provider is out of the network, the system will display this: “We are unable to determine your participation status Services rendered by providers that are not part of the patient’s network are not covered.”
- A member might still be covered for out-of-network benefits.

Questions?

Call the Provider Service Center at [1-888-MD AETNA \(1-888-632-3862\)](tel:1-888-MD-AETNA) (TTY: [711](tel:711)).

Affirmative statement for financial incentives

[Here’s how we make coverage decisions and help members access eligible services.](#)

How we make coverage determinations and utilization management (UM) decisions

We use evidence-based clinical guidelines from nationally recognized authorities to make UM decisions.

2024 UPA Carrier Contract List

Carrier List	Line of Business	Provider Rep	Email	Phone/Fax	Notes
Aetna	PPO/POS/EPO	Lora Yates	Yatesl@aetna.com	(P) (860) 900-6171	
	Medicare Advantage				* UT is not contracted at this time
American Health Plans	I-SNP	TBD		(P) (423)747-9622	
BlueCross BlueShield Tennessee		Jessica Taylor	jessicam_taylor@bcbst.com	(P) (865) 588-4647	
	*Network P	Commercial		(F) (865) 588-4655	
	*Network S	Commercial Limited Network, Exchange			
	*Network L	Commerical Small Group, Exchange			Effective 1/1/22. *Entire group must have privileges at UT
	*BlueAdvantage LPP0	Medicare Advantage			
	*BlueCare & TennCare Select & CoverKids	TennCare/CHIP			PCP Required
*Blue Care Plus	SNP				
Cigna	PPO/POS/EPO	Melissa Gibson	melissa.gibson3@cigna.com	(P) (804) 688-2412	
	*Cigna Connect	Exchange			*Effective 01/01/2022 georgaphical restrictions removed
	*Cigna- Great West	Commercial			
	*Cigna Local Plus	Commercial Limited Network			*Tennova is out of network
*Cigna MA (Healthsprings)	Medicare Advantage HMO and PPO				*Must have PCP for HMO Plan
Coventry		Provider Service	www.directprovider.com	(P) (800) 937-6824	Now owned by Aetna
	*Coventry WC	WC			
*Coventry Auto	Auto				
Devoted Health	Medicare Advantage	TBD			*Effective 01/01/2024
East TN Health Plan	PPO/EPO	Pending			*Must have privileges at UTMCK or Tennova
Farm Bureau	Medicare Advantage	Deborah Higgs	dhiggs@fbhp.com	(P) 931-560-0041 ext. 6218	*Effective 01/01/2023
First Health	Leased Network/Mail-Handlers/WC	Provider Service	www.directprovider.com	(P) (800) 937-6824	Now owned by Aetna
Humana			humanaproviderservices@humana.com	(P) (800) 448-6262	*Include reference # from 1st attempt to reslove issue
	*Commercial	PPO/CPOS/POS/EPO	Julie Hooyman	jhooyman1@humana.com	*Humana Commercial exiting market mid-2024
	*Humana Gold	Medicare Advantage/SNP			
MultiPlan (PHCS, Beech Street, & IHP)		Customer Service		(800) 950-7040	
*Multiplan Medical	PPO/Leased Network				
*Multiplan WC	WC				
*Multiplan Auto	Auto				
NHC Advantage	I-SNP	Robyn Hopkins	robyn.hopkins@allyalign.com	(P) (913) 653 - 5921	
NovaNet PPO	Leased Network/Medical/Auto/WC	Jill Smith	jsmith@novanetppo.com	(P) (800) 513-7177 Ext. 283	
NX Health Network	PPO	TPA - Claims Issues	www.capitoladm.com		
Signature Advantage Plan	I-SNP	Kate Kessler	networksupport@signatureadvantageplan.com	(615) 258-5567	*Effective 01/01/2023
UnitedHealthcare		Amanda Hustad	Amanda_Hustad@uhc.com	(P) (423) 845 -0173	
	*UHC, UHC Navigate	HMO/PPO/POS		(F) (844) 387-3343	
	*UHCRV	HMO/PPO/POS			
	*UnitedHealthcare Community Plan	TennCare/SNP			PCP Required
	*Medicare Solutions	Medicare Advantage/AARP			
	*VACCN	Veterans			
	*Coverkids				
*Exchange	Exchange				Effective 1/1/22
UPMC Health Plan	Medicare Advantage		Pending		
Wellcare	Medicare Advantage HMO and PPO	Barbre Jackson	Barbre.L.Jackson@wellcare.com	(501) 366-6268	
Wellpoint (Formerly AmeriGroup/AmeriVantage)	TennCare/Medicare Advantage/SNP	Bradley Clifford	Bradley.clifford@wellpoint.com	(P) (423) 637-9721	PCP Required
*Coverkids				(F) (866) 574-6748	

*Humana Commercial products exiting market mid-2024