



Bluegrass Family Health

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Summer 2004 Provider Newsletter

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WELCOME, NEW PROVIDERS

We would like to take this opportunity to welcome our new providers to the Bluegrass Family Health Network. We are pleased to announce the addition of 1,000 new physicians, and numerous facilities to the network since the publication of our last newsletter. These new providers include the following:

- Jewish Hospital
- Jewish Hospital Shelbyville
- Frazier Rehab Institute
- South Indiana Rehab Hospital
- Clark Memorial Hospital
- Washington County Hospital
- Scott County Hospital

- Flaget Memorial Hospital
- Meadowview Regional Medical Center
- St. Luke Hospital - East
- St. Luke Hospital - West
- St. Elizabeth Medical Center - North
- St. Elizabeth Medical Center - South
- St. Elizabeth Medical Center/
Grant County Hospital
- King's Daughters Medical Center
- Our Lady of Bellefonte Hospital
- Lake Cumberland Regional Hospital
- T. J. Samson Community Hospital
- Wayne County Hospital
- Morgan County Appalachian
Regional Hospital

- McDowell Appalachian
Regional Hospital
- Whitesburg Appalachian
Regional Hospital
- Williamson Appalachian
Regional Hospital
- Owensboro Medical Health System
- Methodist Hospital Henderson County
- Methodist Hospital Union County

Whether you are new to Bluegrass Family Health or an existing provider, we would like to say thank you for the excellent care you give to our members, and for being an invaluable part of our network. ■

Bluegrass Family Health Precert List

In order to ensure coverage for your patient and payment for your services, please remember to obtain precertification (prior authorization) for those services listed on the Bluegrass Family Health Precert List. Failure to obtain precertification when required per contract will result in non-payment for services rendered. In such

instances, the patient is not responsible for payment. Bluegrass Family Health does not provide retroactive precertification for services requiring precertification. Also, if Bluegrass Family Health is secondary (for example, where auto insurance, Medicare, or other commercial insurance is primary), precertification is required for those services

on the Precert List in order for Bluegrass Family Health to pay what the primary insurance does not cover. The current Precert List is being modified, and will soon be available from your Provider Relations Representative and our website, www.bgfh.com. A written notice will be sent in the near future explaining the changes. ■

Bluegrass Family Health Launches Bluegrass Consumer Choice Plan

In February, Bluegrass Family Health introduced Bluegrass Consumer Choice (BCC) – a consumer-driven health plan – as a full-replacement product for Kentucky employers. The new product couples a funding arrangement (HRA, HSA, FSA) administered by Wells Fargo, with a PPO plan design.

On May 1, Turner, Whitley, and Morton, a physicians’ office in Corbin, KY, became the first Bluegrass Consumer Choice client, replacing its Bluegrass PPO plan for 22 employees and family members. Business Manager Chris Turner says the group was facing premium increases of 15%

and would not have been able to afford health care coverage if it didn’t make a change. Because of the status of the partnership company, the three partners will have a health savings account (HSA) attached to a high-deductible PPO, while the other employees will have an HRA combined with the PPO. Turner says she hopes to get everyone into an HSA next year. Turner says an on-site Microsoft PowerPoint presentation by Bluegrass helped employees understand the new plan.

Web-based tools support all phases of the plan. For example, health risk assessments can be conducted online, and employees can check

the status of their funding arrangement or deductible through a link with the trustee.

Since then, several other groups have adopted the BCC plan design. For more information on Bluegrass Consumer Choice, please contact our Marketing Department at 859-269-4475. ■

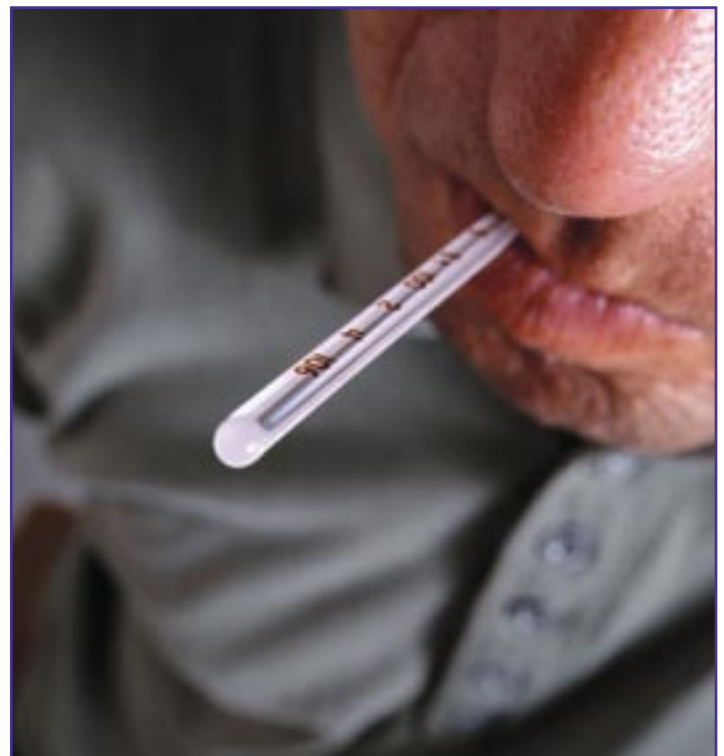


Influenza Vaccine Coverage and Payment

Since the 2004-2005 influenza season is rapidly approaching, we want to make you aware of our influenza vaccine coverage and payment guidelines. Bluegrass Family Health will cover the influenza virus vaccine in its various injectable forms. Following are the reimbursement rates for each CPT®* code:

CPT Code	CPT Description	Payment Per Dose
90655	Influenza virus vaccine, split virus, preservative free , for children 6-35 months of age, for intramuscular use	\$15.00
90657	Influenza virus vaccine, split virus, for children 6-35 months of age, for intramuscular use	\$10.44
90658	Influenza virus vaccine, split virus, for use in individuals 3 years of age and above, for intramuscular use	\$10.44

If the member selects the influenza virus in any other form, such as Flumist®**, CPT®* code 90660, Influenza virus vaccine, live, for intranasal use; the member may incur additional charges to be paid to the provider. Bluegrass Family Health’s current reimbursement rate for 90660 is \$10.44. In order for the provider to collect additional reimbursement above and beyond the allowed amount from the member, the provider must obtain a financial waiver.



Please contact your Provider Relations Specialist or our Pharmacy Administration department with any questions. We can be reached at 859-269-4475 or 800-787-2680. ■

* CPT is a registered trademark of the American Medical Association.

** Flumist is a registered trademark of MedImmune Vaccines Incorporated.

2004 Legislative Changes

Following is a summary of House Bill 650, which passed during the 2004 legislative session and became effective July 13, 2004.

The timeframes in KRS 304.17A-607(1)(h) for making utilization review decisions (including Pharmacy requests) have been repealed and replaced with the timeframe requirements in the U.S. Department of Labor (DOL) claims regulation 29 CFR Part 2560.

New Utilization Review Timeframes:

- **Urgent Care Decisions** - Provide notification as soon as possible, but no later than 72 hours from the time of the request.
- **Concurrent Care Decisions** - Provide written notice within 24 hours from receipt of the request.
- **Retrospective Review of Emergency Hospital Admission** - Provide written notice within 24 hours from receipt of the request.
- **Pre-Service Decisions** - Provide written notice within a reasonable period of time appropriate to the medical circumstances, but no later than 15 calendar days from receipt of the request.
- **Post-Service Decisions** - Provide written notification within a reasonable period of time, but no later than 30 calendar days from receipt of the request. ■

There must be an easier way – Now there is!

Bluegrass Family Health would like to take a moment to introduce ZirMed: a HIPAA-compliant alternative to conventional HCFA-1500 and UB-92 claims processing. ZirMed's solution has a proven track record with thousands of installations nationwide.

ZirMed immediately increases your cash flow and significantly decreases your A/R days! Here's how:

- Staff productivity is dramatically increased by utilizing our online claims submission and correction. Our real-time claim editing feature will allow you to slash payer reimbursement times by days, weeks, and even months.

- Error reports are combined into one easy-to-read report, accessible to you indefinitely – 24 hours a day, 7 days a week. You'll never need to print and shelf another report.

- Enhanced claims reporting and management tools significantly reduce the time required to work rejections. Instantly sort claims by payer, patient, provider, batch or D.O.S. for select claims, all claims, or just rejected claims whenever you want to see them.

- Works seamlessly with ANY existing billing software.
- NO requirements for expensive upgrades to submit HIPAA 837 X-12 claims. (ZirMed as your business

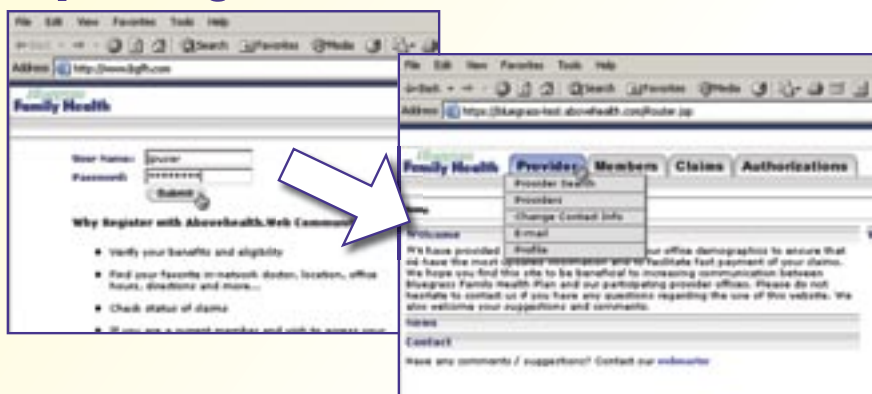
partner fulfills these requirements for you. We're 100% HIPAA-compliant!)

- Set-up, implementation, and training are fast and easy.

Visit us at www.zirmed.com, or call ZirMed's Bluegrass Family Health Interactive Hotline at 877-494-7633, ext. 304. ■



MyBluegrassInfo



Bluegrass Family Health encourages all participating providers to sign up to use our website for eligibility verification, precertification request status and routine claims status checks, including how and when a claim was paid.

To sign up for MyBluegrassInfo, go to www.bgfh.com, click on Providers, then Forms, then complete and fax the applicable E-health Enrollment Form as indicated. You'll be glad you did! Please call your Provider Relations Specialist with any questions. ■

Bluegrass Family Health

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Provider Satisfaction Survey



Bluegrass Family Health will be conducting its annual Provider Satisfaction Survey. Surveys will be mailed to a randomly selected sample of our Primary Care Physicians and Specialists in late August or early September. Complete results will be published in a future issue of the Provider Network News.

The survey measures providers' satisfaction in 6 key categories: customer service, provider relations, network, care coordination, quality management, and finance issues. Bluegrass Family Health uses the survey results to identify the key drivers of satisfaction, or dissatisfaction, and to implement improvements in our processes.

If you receive a survey, please take a few minutes to complete and return it – we appreciate and value your feedback. ■

Formularies Available on ePocrates



Effective January 1, 2004, Bluegrass Family Health began providing two formulary options for employer groups. State employees have the Commonwealth of Kentucky Formulary, and commercial groups have the Commercial Formulary. Providers can now access our formularies on ePocrates from their PDA (Personal Digital Assistant). For more information click on ePocrates on the Bluegrass Family Health website provider page. ■