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IN CASE YOU MISSED IT...A RECAP OF IMPORTANT NEWS FOR PROVIDERS

We know you're very busy taking care of our members! So it's easy for an important piece of news to slip through unnoticed. To help you out, we're sending this quick summary every two weeks of recent communications that we've either posted online or mailed. Please share with your office staff, including billing staff. Thank you.

News for All Provider Types

- Issue 4, 2019 of Provider News
- October 2019 Medical Policy Update
- Authorization Process Changes for Urgent/Unplanned Inpatient Requests: Watch a Virtual Training
 Session
- Tell Us What You Think Survey: Document Attachment Update for Authorizations
- Continuous Glucose Monitoring (CGM) System Available Within the Pharmacy Prescription Drug Benefit
- <u>UPDATE: Changes In Authorization Requirements for Out-Of-Network Outpatient Services Effective</u> <u>January 1, 2020</u>
- A Survey You Don't Want To Miss
- <u>Using Correct Anatomical Modifiers</u>
- <u>Transcranial Magnetic Stimulation (TMS) To Be Removed From Prior Authorization Effective October</u> 15, 2019
- Fourth Quarter 2019 Update: Changes to the Highmark Drug Formularies
- COMING SOON! Case Management Referral Feature in NaviNet^{®*}
- UPDATE: Submit Home Infusion Therapy Claims to Proper Blue Plan Service Area*
- New Flu Flyer Available*
- REMINDER: Authorization Required When Highmark Delaware is Secondary Insurer*
- * This item is only viewable via NaviNet. Log in to NaviNet, and from **Plan Central**, select **Resource Center**, then the **Plan Central Library**



News for Professional Providers Only (HIPAA 837P Claim Submitters

• <u>Physical Medicine Management Program Requirements Apply to Doctors of Chiropractic Medicine Effective January 1, 2020</u>

News for Facility Providers Only (HIPAA 8371 Claim Submitters)

- <u>Update to Highmark's Policies Correct Coding Guidelines Being Enforced Through Pending Claims And Itemized Bill Review</u>
- Inpatient Acute Claims Mapper Installation Complete*

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