Anthem BlueCross

Changes in 2014 Business Practices

In an effort to assist you in providing care to our members, Anthem BlueCross has compiled a number of articles to assist you as we move into 2014. Below are brief articles for some of the changes to the way CMS and Anthem BlueCross will be doing business in 2014.

2014 Medicare Advantage Product Change Article
CLICK HERE to see the changes that apply to members enrolled in Anthem Medicare Preferred Standard (PPO), Blue Cross Senior Secure Plan I (HMO), and Blue Cross Senior Secure Plan II (HMO). You can help members manage their health care costs by being aware of these changes. In addition, remember to check the Member ID card at the beginning of each calendar year, as the member may have changed plans.

CLICK HERE to see the member's 2014 SOBs, EOCs, and Formularies.

Routine Physical Exams Not Covered in 2014
Anthem’s Medicare Advantage (MA) plans have been offering coverage for routine physicals (subject to plan benefits) to their members as an additional benefit in past years. The Affordable Care Act created a benefit for Annual Wellness Visits (AWV) for Medicare beneficiaries and in response, Anthem has decided effective for dates of services on and after 01/01/2014, to no longer cover Routine Physical Exams.

CLICK HERE for additional information on Routine Physicals

Diabetic Supply Changes for 2014
Effective January 1, 2014, all of our Individual Medicare Advantage Plans will only be covering the LifeScan - OneTouch® and Roche - ACCU-CHEK® diabetic glucometers and test strips. The test strips will also have a maximum benefit of 100 test strips per month. Other brands and quantities will require an exception from the provider proving that they are medically necessary. The members who will be impacted by this change were notified in October through their Annual Notice of Change and Evidence of Coverage plan benefit materials. Additionally, an outbound call campaign was launched during Q4.

CLICK HERE for additional information on Diabetic Supply.
**Insulin Coverage Changes for 2014**
Beginning January 1, 2014, many of our Individual Medicare Advantage plans will no longer cover Novolin and Novolog insulin products. Humulin and Humalog insulin will be the covered alternative. This formulary change is meant to help control out-of-pocket expenses while not compromising on quality.

[CLICK HERE for additional information on Insulin Coverage.]

**Notice of Updated CMS 1500 Form**
Effective 1/06/2014 the CMS 1500 claim form will be updated to accommodate ICD-10 changes. The update will include space to report up to twelve diagnoses on the form and additional updates. The new form will be accepted for Medicare Advantage beginning 01/06/14.

[CLICK HERE for additional information on the CMS 1500]

**Acupuncture and Chiropractic Benefit Not Offered in 2014**
Prior to 1/1/2014, Medicare Advantage members had the option of selecting various Optional Supplement Benefit packages which may have included combinations of dental, vision, chiropractic and acupuncture services at an additional plan premium. Effective 1/1/2014, acupuncture and chiropractic benefits will not be offered as an additional, supplemental benefit. We will continue to cover Medicare-covered chiropractic visits for manual manipulation of the spine to correct subluxation as long as services are rendered by a licensed chiropractor or other qualified provider.

The benefit change applies to Medicare Advantage individual plan members only. Providers are encouraged to contact our Provider Services phone line located on the back of the members identification card at any time for benefit verification.

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