

## 2024 Blue Cross Blue Shield and Blue Care Network Quality Program Update – April 24, 2024

# Welcome! We will begin shortly.

### For the best experience, please note:

- Phone lines are muted. Please do not turn your camera/microphone
- Use the chat feature to ask questions or comment during the Q&A portion of the webinar.
- Mute chat notifications by clicking on the “...” in the chat window of Teams and selecting “mute”.
- Use Microsoft Edge as your browser, and if you are using Wi-Fi make sure you have a strong connection.





Blue Cross  
Blue Shield  
Blue Care Network  
of Michigan

# Oakland Physician Network Services 2024 Blue Cross Blue Shield and Blue Care Network Quality Program Update

April 24, 2024

Christina Caldwell

Quality Performance Improvement  
Consultant



# Agenda

- Provider Network Focus for 2024
- 2024 HEDIS Specifications Change - Diabetes
- Overview of Diabetes Measures
- Resources
  - Availity
  - Webinars
  - Patient Experience



## Improve your Diabetes score in 2024

- Blood Pressure Control for Diabetes
- Blood Sugar Control
- Eye Exam
- Kidney Health Evaluation
- Statin Therapy for Diabetes
- Medication Adherence for Diabetes
- Statin Use in Persons with Diabetes

## Patient Experience "Getting Needed Care"

- How often did you get an appointment to see a specialist as soon as you needed?
- In the last 6 months, how often was it easy to get the care, tests, or treatment you needed?

## Laser Focus on Medications

- Impacts medication adherence and Care Coordination in CG-CAHPS
- Discuss the importance of taking prescribed medications and understand why members might not be taking their medications.
- Instruct patients to use their BCBSM prescription card every time they pick up or use mail order via Optum

## Annual Wellness Visit

- New for 2024 – one visit per calendar year, regardless of the previous year's visit date
- Annual Wellness Visits plus an E/M or preventive visit can be completed on the same service date, modifier 25 required.
- Ask about Physical Activity, Mental Health, Bladder Incontinence, and Fall Risk

# Diabetes measures to switch to 2024 HEDIS specifications

NCQA reassessed how the diabetes measures identify individuals with diabetes. They have simplified the new method to avoid including individuals who take diabetes-related medications for reasons other than diabetes, as that number continues to grow with the popularity of these medications for weight loss and control.

The previous measurement year's HEDIS specifications are typically used for quality reporting and incentive calculations (for example, 2024 reporting results use 2023 HEDIS technical specifications).



Blue Cross and BCN will use the **2024 HEDIS specifications** to calculate final quality reporting and incentives for the following measures:

- *Glycemic Status Assessment for Patients With Diabetes (GSD)*
- *Blood Pressure Control for Patients With Diabetes (BPD)*
- *Eye Exam for Patients With Diabetes (EED)*
- *Kidney Health Evaluation for Patients With Diabetes (KED)*
- *Statin Therapy for Patients With Diabetes (SPD)*

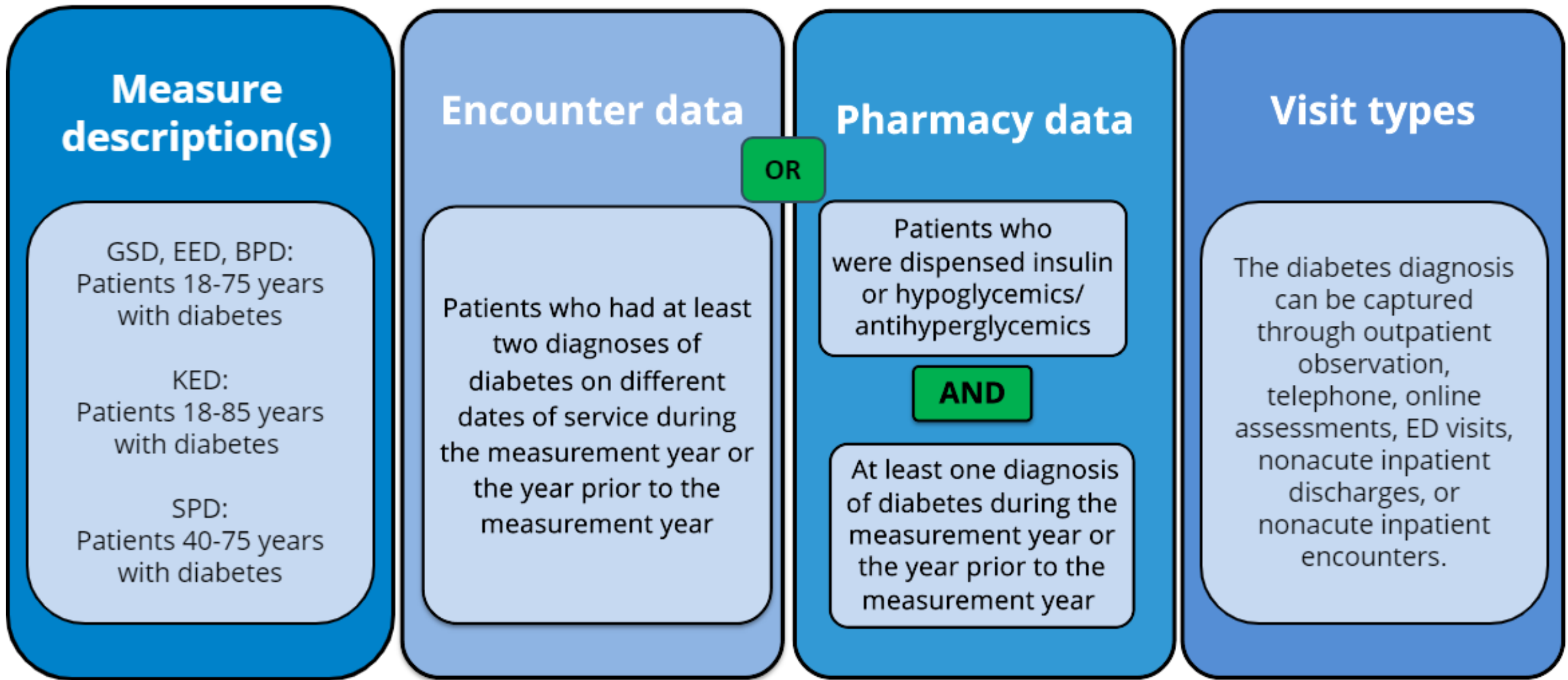
**Tentative  
Plan**

There will be reporting limitations as the HEDIS Engine reports will reflect the 2023 specifications until the final incentive runs in the first quarter of 2025 and the final Health e-Blue<sup>SM</sup> year-end runs (April/May 2025).

Therefore, you will see members in these measures who are included based on 2023 specifications but will ultimately be removed when 2024 specifications are available in the HEDIS engine.

If 2024 measure specifications are available in the HEDIS engine in fall 2024, a one-time ad-hoc report will be created (October/November 2024).

# New for the measurement year 2024: NCQA Diabetes Definition



# New for measurement year 2024: Diabetes scenarios

Scenario	In 2023	In 2024	The patient will be in the 2024 denominator Yes or No
The patient had one diagnosis of diabetes	Yes	Yes	Yes
The patient had only one diagnosis of diabetes	Yes	No	No
The patient had two diagnoses or more of diabetes	Yes	Yes	Yes
The patient had two or more diagnoses of diabetes	Yes	No	Yes
The patient was prescribed a diabetic medication prescribed for weight loss with no diagnosis of diabetes.	Yes	Yes	No

# Glycemic Status for Patients with Diabetes (GSD)

## Closing the gap

### Replaces Hemoglobin A1c Control for Patients With Diabetes (HBD)

November is Diabetes National Month



**Measurement description**

Percentage of patients with diabetes whose glycemic status is compliant or non-compliant

**Member compliant**

**Medicare** - Most recent hemoglobin A1c result of  $\leq 9.0\%$  (less than or equal to)

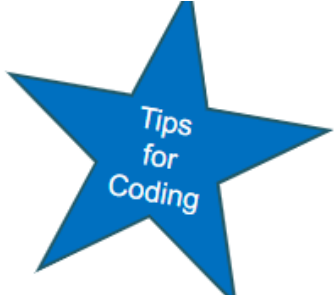
**Commercial** – Most recent hemoglobin A1c result  $< 8.0\%$  (less than)

**Member non-compliant**

**Medicare** - Most recent hemoglobin A1c  $> 9.0\%$  (greater than)

Missing result or not completed during the measurement year

**Commercial** – Most recent hemoglobin A1c  $\geq 8.0\%$  (greater than or equal to)



Submit the appropriate most recent CPT II code on a claim with \$0.01 as the charged amount.

CPT II code	Most recent HbA1c result
3044F	$< 7\%$
3046F	$> 9\%$
3051F	$\geq 7\%$ and $< 8\%$
3052F	$\geq 8\%$ and $\leq 9\%$



# Kidney Health Evaluation for Patients with diabetes (KED) – Closing the gap

March is  
National  
Kidney  
Month



The patient must receive the following lab tests during the measurement year. The estimated glomerular filtration rate, or eGFR, and urine albumin/creatinine ratio, or uACR, don't need to be done on the same day. However, **both** lab tests must be done during the measurement year to close the gap.

**At least one eGFR (blood test) during the measurement year**

eGFR is a calculation that is obtained from any of the following CPT codes:

- \*80047 or \*80048 – Basic metabolic panel
- \*80050 – General health panel
- \*80053 – Comprehensive metabolic panel
- \*80069 – Organ or disease-oriented panels
- \*82565 – Creatinine

**and**

**uACR is identified by**

A quantitative urine albumin test **and** a urine creatinine test. CPT codes are:

- \*82043 – Quantitative urine albumin
- \*82570 – Urine creatinine

**Dates of service must be within a four-day window.**

**or**

A urine albumin creatinine ratio lab test – Closed only by LOINC codes. There are no CPT codes.

**Important:** The KED measure can be closed only through claim submission or approved electronic medical record supplemental data.

# Eye Exam for Patients with Diabetes (EED) Closing the gap

## Information for primary care providers to close the EED Gap

January  
National  
Eye Care  
Awareness  
Month



Copy of the eye exam, report or progress note must include:

- Evidence the exam was completed by an ophthalmologist or optometrist or read by artificial intelligence
- Indication that an ophthalmoscopic exam was completed
- Date the exam was performed
- Results of the exam
- **Note:** Findings for both eyes are required unless there is clear evidence that one of the eyes was removed

A chart, photograph, diagram or drawing of retinal abnormalities must include:

- Date fundus photography was performed
- Evidence that an eye care professional (ophthalmologist or optometrist) or artificial intelligence reviewed the results

Tips  
for  
coding

	Codes	Can satisfy EED PRP incentive	Reimbursable
CPT Codes	*92227	No	Yes
	*92228	No	Yes
	*92229	Yes <sup>1</sup>	Yes
	*92250	No	Yes
CPT II Codes	*2022F	Yes	No reimbursement associated with these codes.  These codes are used only for reporting purposes.
	*2023F	Yes	
	*2024F	Yes	
	*2025F	Yes	
	*2026F	Yes	
	*2033F	Yes	

<sup>1</sup>Procedure code \*92229 without a CPT II reporting code will give credit for the EED measure. However, we encourage providers to continue to include a CPT II reporting code when submitting code \*92229. If the results are negative for retinopathy, submitting a CPT II reporting code from the 'Eye exam without evidence of retinopathy' value set with code \*92229 will close the gap for two years.

Focus on the importance of eye care with your patients.

## Diabetic Eye Exams

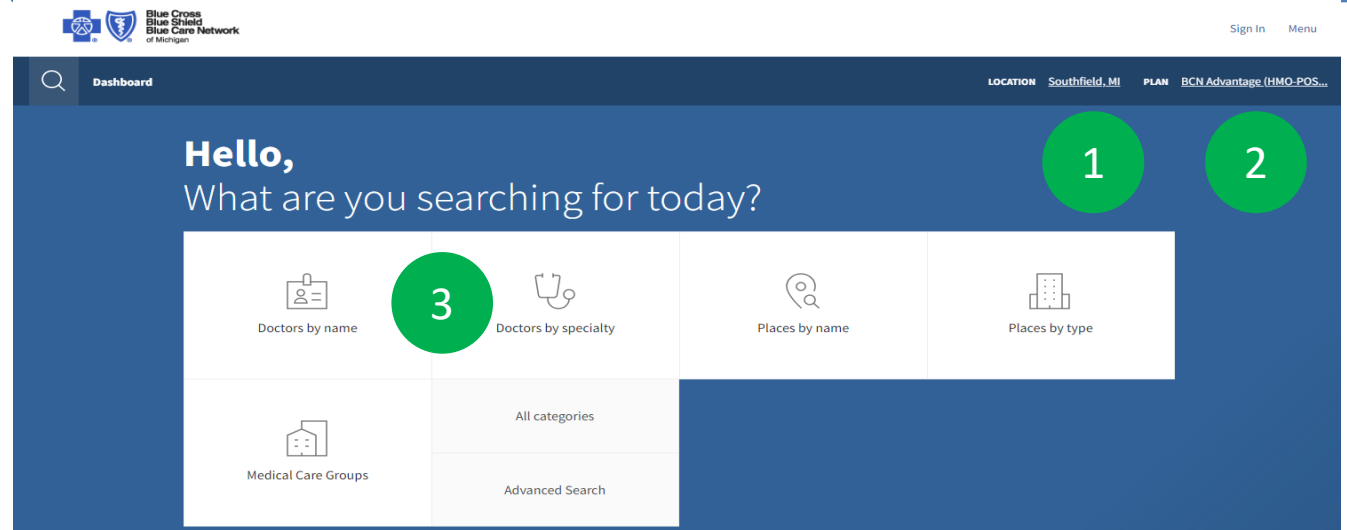
1	Diabetes can put your eyes at an increased risk of conditions such as cataracts and glaucoma. Another major concern is the possible development of diabetic retinopathy.
2	Getting a dilated eye exam at least once a year is important in finding and treating diabetic eye disease early.
3	Diabetic eye exams check for: <ul style="list-style-type: none"><li>• Diabetic retinopathy</li><li>• Diabetic macular edema</li><li>• Cataracts</li><li>• Glaucoma</li></ul>

[Diabetic Retinopathy | National Eye Institute \(nih.gov\)](https://www.nia.nih.gov/health/diabetic-retinopathy)

## Locating Eye Care Professionals in your area to share with patients and office staff

[For Members: Find Care | BCBSM](#)

1. Choose location
2. Select Plan
3. Doctor by Specialty – “eye doctor”
4. Download results by using Ctrl + P – share list with patients or office staff



Blue Cross Blue Shield Blue Care Network of Michigan

Sign In Menu

Dashboard

LOCATION Southfield, MI PLAN BCN Advantage (HMO-POS...)

Hello,  
What are you searching for today?

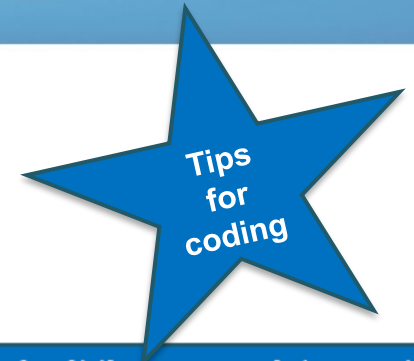
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Doctors by name 3 Doctors by specialty Places by name Places by type

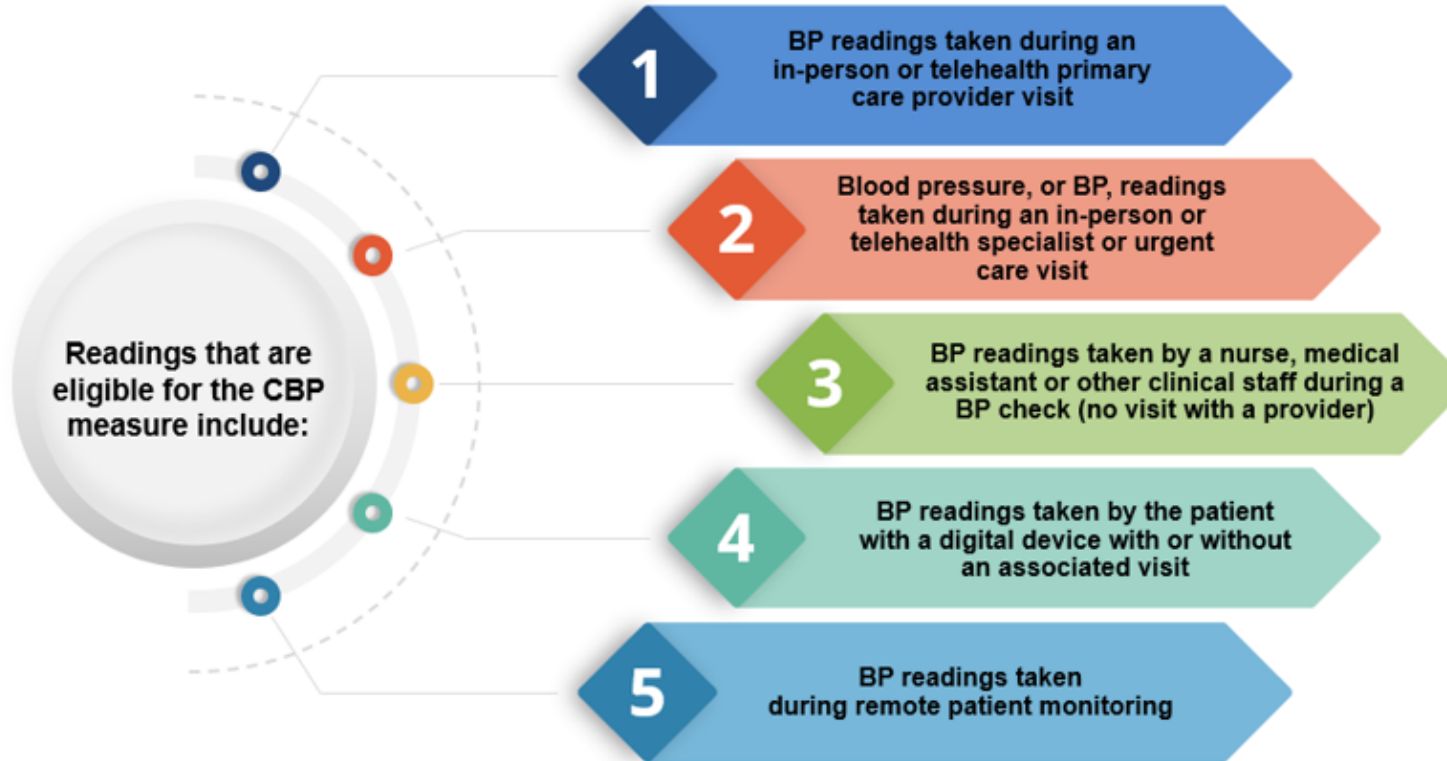
Medical Care Groups All categories Advanced Search

# Blood Pressure Control for Patients with Diabetes (BPD)

**Note: Any provider type can submit a BP reading that would count toward the BPD measure. Therefore, patients' PCPs need to coordinate care with other providers who may also be managing their patients' care.**



May  
High Blood  
Pressure  
Awareness  
Month



Submit the appropriate most recent CPT II code on a claim with \$0.01 as the charged amount

CPT II code	Most recent systolic blood pressure
*3074F	Less than 130 mm Hg
*3075F	130 to 139 mm Hg
*3077F	Greater than or equal to 140 mm Hg

CPT II code	Most recent diastolic blood pressure
*3078F	Less than 80 mm Hg
*3079F	80 to 89 mm Hg
*3080F	Greater than or equal to 90 mm Hg

## HEDIS measures SPD and SPC

### Statin Therapy for Patients with Diabetes (SPD)

#### Denominator:

- 40 to 75 years old and Diabetes (Type1 and 2)
- At least two diagnoses of diabetes on different dates of service or
- Dispensed insulin or anti-hyperglycemics **and** at least one diagnosis of diabetes during the measurement year or the year prior to the measurement year

#### Numerator:

- Received at least one statin of any intensity
- Remained adherent 80% of the time

### Statin Therapy for Patients with CVD (SPC)

#### Denominator:

- Males 21-75 years old and Females 40-75 years old
- Identified with ASCVD by event or diagnosis

#### Numerator:

- Received at least one high or moderate-intensity statin
- Remained adherent 80% of the time

**Exclusions:** (multiple)

## SUPD

#### Denominator:

- Medicare Part D
- 40 to 75 years old
- Dispensed at least two FDA-approved diabetes medication fills (including insulin) during the calendar year

**Numerator:** Received one statin fill of any intensity

**Exclusions:** ICD-10 codes to document diagnosis for exclusion must be billed annually



## Medication adherence

#### Denominator:

- Medicare Part D
- Dispensed two medication fills for a specific class in a calendar year

**Numerator:** Patient fills prescriptions to cover 80% of the time they are supposed to take medication

#### Exclusions:

- End stage renal disease, dialysis and hospice
- Diabetes: Insulin
- Hypertension: Entresto
- Cholesterol: None





# Resources



## Diabetes, HEDIS, and More in 2024 – Webinar

### Diabetes, HEDIS, and More in 2024 – Webinar May 9, 2024 – 11:00 am – 12:00 pm

Heather Stamat, DO, MBA, Medical Director—Clinical Partnerships, BCBSM

Jessi Vandergeld, Manager, Provider Affairs Contracting and Network Performance, BCBSM

**Session Description:** Diabetes is a complex chronic condition that can be challenging for providers to manage while trying to navigate ever-changing HEDIS measures and definitions. NCQA made many changes in 2024, including the development of a new HEDIS quality measure called Glycemic Status Assessment for Patients with Diabetes (GSD). This session will provide an overview of the new GSD measure and review definitions for the remaining diabetes measures. The speakers will also spend time describing the importance of a holistic focus on diabetes to help improve your diabetes score in 2024!

#### Learning Objectives - Participants will:

1. Understand NCQA changes to the Diabetes related HEDIS measures.
2. Learn how HEDIS and Medication Adherence (Pharmacy Part D) measures are defined.
3. Gain ideas about how to close quality care gaps and discover what BCBSM is doing to promote physician organization success in contracts and incentives.

#### Webinar link and information

Microsoft Teams [Need help?](#)

[Join the meeting now](#)

Meeting ID: 270 052 515 496

Passcode: Hnc5nL

#### Dial-in by phone

[+1 313-314-1414,,759694892#](#) United States, Detroit

[Find a local number](#)

Phone conference ID: 759 694 892#

For organizers: [Meeting options](#) | [Reset dial-in PIN](#)

Posted on the PGIIP Collaboration Site



**2024 Quality Rewards**  
Blue Cross Blue Shield of Michigan and  
Blue Care Network's Performance Recognition and  
Physician Group Incentive Program

**PROVIDER INCENTIVE PROGRAM FOR:**

- Blue Care Network commercial
- BCN Advantage<sup>SM</sup>
- Blue Cross commercial
- Medicare Plus Blue<sup>SM</sup>

## Measures added to the 2024 Performance Recognition Program, or PRP

### For Blue Care Network commercial

#### **Childhood Immunization Status – Flu**

Additional incentive for the completion of the flu vaccine

#### **Colorectal Cancer Screening**

#### **Diabetes Care-Kidney Health Evaluation**

### For Medicare Plus Blue<sup>SM</sup> and BCN Advantage<sup>SM</sup>

#### **Diabetes Care-Kidney Health Evaluation**

#### **Medication Adherence for Diabetes**

#### **Medication Adherence for Hypertension**

#### **Medication Adherence for Cholesterol**



# 2024 Performance Recognition Program



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2024 PRP Quality Measures	BCN commercial		Medicare Advantage	
	Goal	Payout	Goal	Payout
Antidepressant Medication Management – Effective Continuation Phase Treatment	Flat Fee	\$50		
Appropriate Testing for Pharyngitis	Flat Fee	\$50		
Appropriate Treatment for Upper Respiratory Infection	Flat Fee	\$50		
Asthma Medication Ratio	Flat Fee	\$50		
Avoidance of Antibiotic Treatment for Acute Bronchitis	Flat Fee	\$50		
Breast Cancer Screening	81.51%	\$70	82%	\$25
Cervical Cancer Screening	82.31%	\$50		
Child and Adolescent Well-Care Visits	Flat Fee	\$25		
Childhood Immunization Status – Combo 10	Flat Fee	\$175		
Colorectal Cancer Screening	68.37%	\$50	82%	\$25
Childhood Immunization Status - Flu	Flat Fee	\$75		
Chlamydia Screening in Women	62.49%	\$50		
Controlling High Blood Pressure	75.67%	\$15	84%	\$25
Diabetes Care – Blood Pressure Control	78.74%	\$15		
Diabetes Care – Blood Sugar Control < 8%	70.66%	\$175		
Diabetes Care - Blood Sugar Control ≤ 9%			88%	\$75
Diabetes Care – Eye Exam	64.86%	\$100	83%	\$85
Diabetes Care - Kidney Health Evaluation	59.03%	\$75	69%	\$40

# 2024 Performance Recognition Program Continued



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2024 PRP Quality Measures	BCN commercial		Medicare Advantage	
	Goal	Payout	Goal	Payout
Follow-Up after ED Visit for High Risk Multiple Chronic Conditions			Flat Fee	\$65
Immunizations for Adolescents – Combo 2	Flat Fee	\$150		
Immunizations for Adolescents – HPV	Flat Fee	\$75		
Medicare Wellness Visit			70%	\$25
Medication Adherence for Diabetes			91%	\$30
Medication Adherence for Cholesterol			92%	\$30
Medication Adherence for Hypertension			92%	\$30
Statin Therapy for Patients with Cardiovascular Disease – Received Statin Therapy	88.68%	\$100	91%	\$50
Statin Use in Persons with Diabetes			93%	\$50
TRC – Medication Reconciliation Post-Discharge			Flat Fee	\$50
TRC – Patient Engagement			Flat Fee	\$50
Use of Imaging Studies for Low Back Pain	82.61%	\$100		
Weight Assessment and Counseling for Children: BMI Percentile, Counseling for Nutrition and Counseling for Physical Activity (Combined Rate)	85.97%	\$30		
Well-Child Visit First 15 months	Flat Fee	\$100		
Well-Child Visits – Well Visits 15 – 30 Months	Flat Fee	\$100		

Posted on Health e-Blue Homepage



## 2024 Provider Incentive Program Quality Measure Descriptions

Updated April 11, 2024

### *2024 Provider Incentive Program: Quality Measure Descriptions*

This guide (document) provides additional reference material to help Blue Cross Blue Shield of Michigan and Blue Care Network providers achieve 2024 Quality Rewards incentives. The Quality Rewards program is designed to support Blue Cross and Blue Care Network in achieving the objectives of the Healthcare Effectiveness Data and Information Set, or HEDIS®, and the Centers for Medicare & Medicaid Services' star ratings program. This document is to provide guidance on closing care gaps for the HEDIS<sup>4</sup> measurement year and should not be used as guidance for billing for payment purposes. This document is not a comprehensive document of NCQA specifications and is not a replacement of the NCQA specifications, and we still recommend reviewing the NCQA specifications. For purposes of this program, MY 2023 NCQA HEDIS value set is used. The medical billing codes presented in this document are from the NCQA MY 2023, which may also account for past services for measures with a lookback period. Some of these codes may have been discontinued for billing but still close the gap in care for HEDIS as long as they remain in the NCQA HEDIS value set.

For more information, please reference:

- The 2024 Quality Rewards booklet posted on Health e-Blue<sup>SM</sup>
- NCQA reference material available at [ncqa.org](https://www.ncqa.org)\*
- ECDS measures: <https://www.ncqa.org/hedis/the-future-of-hedis/hedis-electronic-clinical-data-system-ecds-reporting/>\*
- Centers for Medicare & Medicaid Services stars reference material available at [medicare.gov](https://www.medicare.gov)\*

# 2024 BCN HEB Data Schedule

**BCN HEB Data Schedule for 2024**

Measurement Period	HEB Refresh cycle	Data Entered into HeB as of	Data Submitted in EMR by	Data Submitted to MIHIN PPQC	Claims Processed through Date	Results reflected in HeB Refresh
1/1/2023-12/31/2023	Jan Refresh	12/31/2023	12/18/2023	11/30/2023	12/31/2023	1/21/2024
	Feb Refresh	1/20/2024	1/26/2024	12/31/2023	1/31/2024	2/25/2024
	March Refresh	NA	NA	NA	2/29/2024	3/23/2024
1/1/2024-12/31/2024	April Refresh	NA	3/19/2024	2/29/2024	3/31/2024	4/21/2024
	May Refresh	4/20/2024	4/16/2024	3/31/2024	4/30/2024	5/26/2024
	June Refresh	5/25/2024	5/21/2024	4/30/2024	5/31/2024	6/23/2024
	July Refresh	6/22/2024	6/18/2024	5/31/2024	6/30/2024	7/21/2024
	August Refresh	7/20/2024	7/16/2024	6/30/2024	7/31/2024	8/25/2024
	September Refresh	8/24/2024	8/20/2024	7/31/2024	8/31/2024	9/22/2024
	October Refresh	9/21/2024	9/17/2024	8/31/2024	9/30/2024	10/20/2024
	November Refresh	11/5/2023	10/15/2024	9/30/2024	10/31/2024	11/24/2024
	December Refresh	11/23/2024	11/19/2024	10/31/2024	11/30/2024	12/22/2024
	Jan Refresh	12/21/2024	12/16/2024	11/30/2024	12/31/2024	1/26/2025
	Feb Refresh	1/25/2025	TBD	TBD	1/31/2024	2/23/2025
	March Refresh	TBD	TBD	TBD	2/29/2025	3/23/2025

- \* NA is not applicable to that refresh cycle
- \* Data includes; Medical Claims, EMR/PPQC, Lab Results, MCIR & HEB Retrieved after running through the HEDIS engine
- \* Processed through date is approximate, and typically reflects the end of the month
- \* EMR Files will be submitted by the 3rd Monday of the month unless otherwise stated
- \* Membership/Provider relationship is fixed November through April

updated Feb 12 2024

# 2024 PPO HEB Data Schedule

BCBSM Commercial PPO HEB Data Schedule 2024						
Measurement Period	HEB Refresh cycle	Data Entered into HeB as of	Data Submitted in EMR by 3rd Monday of the month	Data Submitted to MIHIN PPQC	Finalized Claims Processed through Date	Results reflected in HeB Refresh
1/1/2023-12/31/2023	Jan Refresh	12/11/2023	11/20/2023	10/31/2023	11/30/2023	1/11/2024
	<i>March Refresh</i>	<b>1/20/2024</b>	<b>1/26/2024</b>	<b>12/31/2023</b>	2/29/2024	5/11/2024
1/1/2024-12/31/2024	May Refresh	NA	3/19/2024	2/29/2024	3/31/2024	5/11/2024
	June Refresh	5/11/2024	4/16/2024	3/30/2024	4/30/2024	6/11/2024
	July Refresh	6/11/2024	5/21/2024	4/30/2024	5/31/2024	7/11/2024
	August Refresh	7/11/2024	6/18/2024	5/31/2024	6/30/2024	8/11/2024
	September Refresh	8/11/2024	7/16/2024	6/30/2024	7/31/2024	9/11/2024
	October Refresh	9/11/2024	8/20/2024	7/31/2024	8/31/2024	10/11/2024
	November Refresh	10/11/2024	9/17/2024	8/31/2024	9/30/2024	11/11/2024
	December Refresh	11/11/2024	10/15/2024	9/30/2024	10/31/2024	12/11/2024
	Jan Refresh	12/11/2024	11/19/2024	10/31/2024	11/30/2024	1/11/2025
	Feb Refresh	NA	NA	NA	NA	NA
	March Refresh	1/11/2025	<b>TBD</b>	<b>TBD</b>	2/29/2025	5/11/2025

\* NA is not applicable to that refresh cycle  
 \* Data includes; Medical Claims, EMR/PPQC, Lab Results, MCIR & HEB Retrieved after running through the HEDIS engine  
 \* Processed through date is approximate, and typically reflects the end of the month  
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 \*\*Membership/Provider relationship is fixed November through April

**Updated Feb 12 2024**

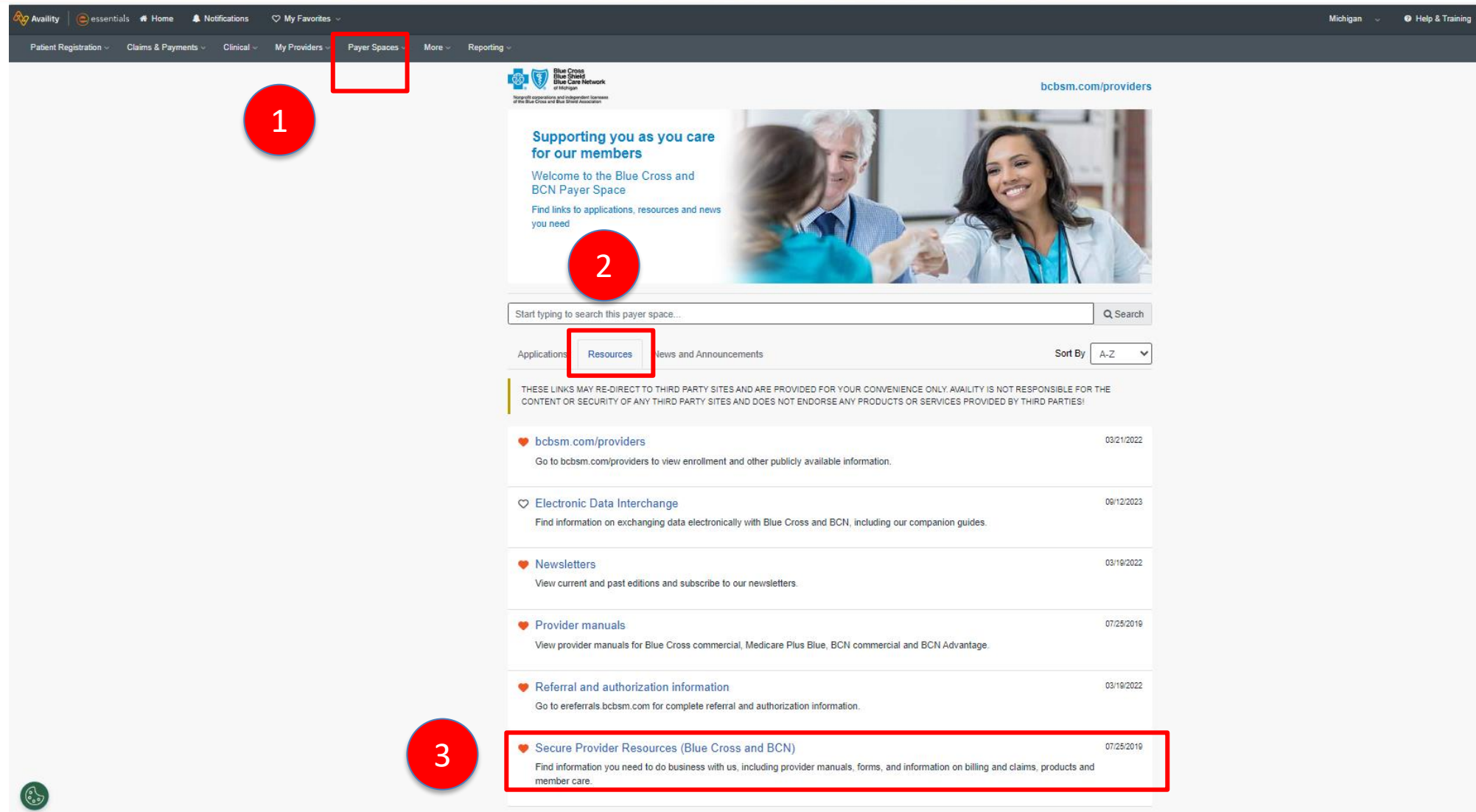
# 2024 MAPPO HEB Data Schedule

## BCBSM MAPPO HEB Data Schedule 2024

Measurement Period	HEB Refresh cycle	Data Entered into HeB as of	Data Submitted in EMR by 3rd Monday of the month	Data Submitted to MIHIN PPQC	Finalized Claims Processed through Date	Results reflected in HeB Refresh
1/1/2023-12/31/2023	Jan Refresh	12/10/2023	11/20/2023	10/31/2023	11/30/2023	1/13/2024
	April Refresh	1/20/2024	1/26/2024	12/31/2023	2/29/2024	5/11/2024
1/1/2024-12/31/2024	May Refresh	NA	3/19/2024	2/29/2024	3/31/2024	5/11/2024
	June Refresh	5/11/2024	4/16/2024	3/31/2024	4/30/2024	6/12/2024
	July Refresh	6/12/2024	5/21/2024	4/30/2024	5/31/2024	7/13/2024
	August Refresh	7/13/2024	6/18/2024	5/31/2024	6/30/2024	8/10/2024
	September Refresh	8/10/2024	7/16/2024	6/30/2024	7/31/2024	9/12/2024
	October Refresh	9/12/2024	8/20/2024	7/31/2024	8/31/2024	10/10/2024
	November Refresh	10/10/2024	9/17/2024	8/31/2024	9/30/2024	11/12/2024
	December Refresh	11/12/2024	10/15/2024	9/30/2024	10/31/2024	12/11/2024
	Jan Refresh	12/11/2024	11/19/2024	10/31/2024	11/30/2024	1/14/2025
	Feb Refresh	NA	NA	NA	NA	NA
	March Refresh	NA	NA	NA	NA	NA
	April Refresh	1/20/2025	TBD	TBD	2/28/2025	5/10/2025

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# Availity: Click *Secure Provider Resources*



Availity | essentials | Home | Notifications | My Favorites

Patient Registration | Claims & Payments | Clinical | My Providers | **Payer Spaces** | More | Reporting

Supporting you as you care for our members  
Welcome to the Blue Cross and BCN Payer Space  
Find links to applications, resources and news you need

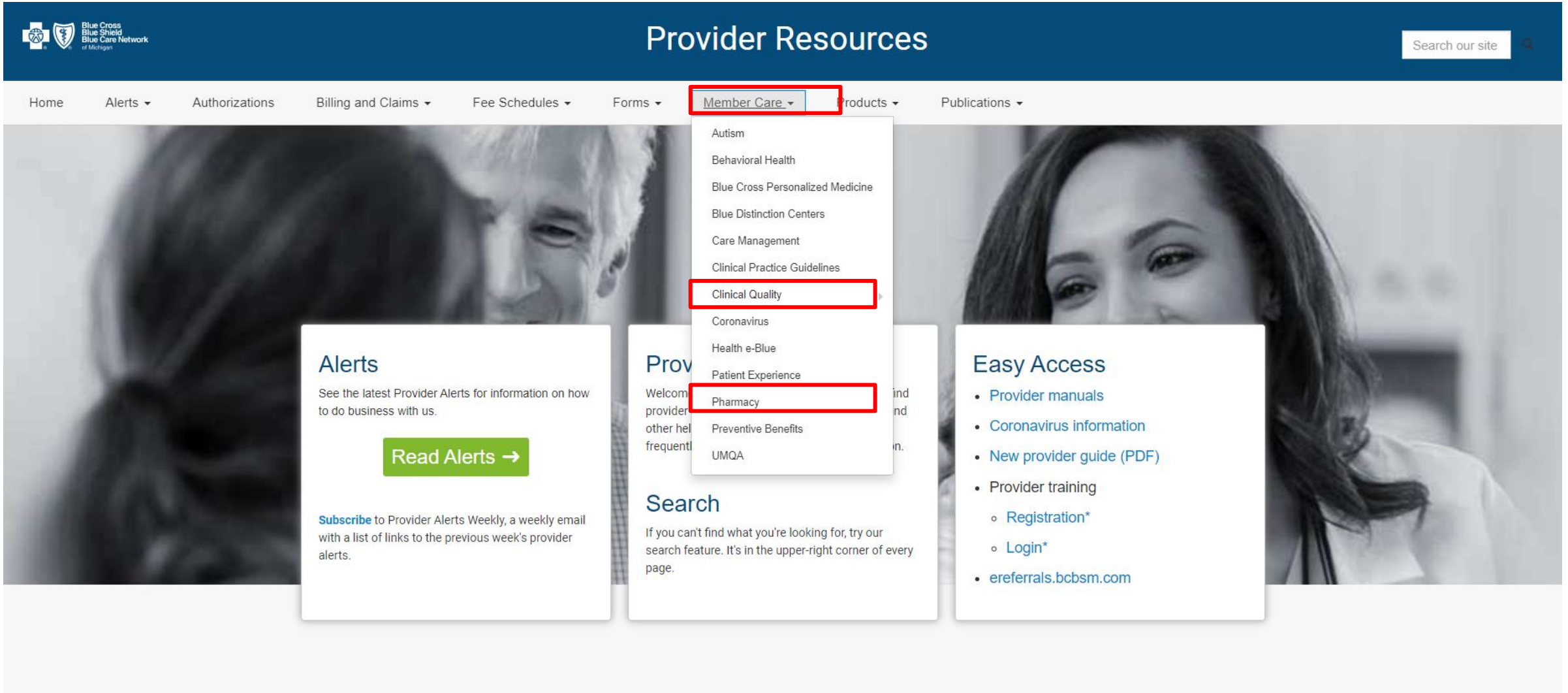
Start typing to search this payer space... Search

Applications | **Resources** | News and Announcements | Sort By: A-Z

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- bcbsm.com/providers (03/21/2022)  
Go to bcbsm.com/providers to view enrollment and other publicly available information.
- Electronic Data Interchange (09/12/2023)  
Find information on exchanging data electronically with Blue Cross and BCN, including our companion guides.
- Newsletters (03/19/2022)  
View current and past editions and subscribe to our newsletters.
- Provider manuals (07/25/2019)  
View provider manuals for Blue Cross commercial, Medicare Plus Blue, BCN commercial and BCN Advantage.
- Referral and authorization information (03/19/2022)  
Go to ereferrals.bcbsm.com for complete referral and authorization information.
- Secure Provider Resources (Blue Cross and BCN) (07/25/2019)**  
Find information you need to do business with us, including provider manuals, forms, and information on billing and claims, products and member care.

Availity® is an independent company that contracts with Blue Cross Blue Shield of Michigan and Blue Care Network to offer provider portal services.



The screenshot shows the 'Provider Resources' page. The navigation bar includes links for Home, Alerts, Authorizations, Billing and Claims, Fee Schedules, Forms, Member Care, Products, and Publications. The 'Member Care' dropdown menu is open, listing various services such as Autism, Behavioral Health, Blue Cross Personalized Medicine, Blue Distinction Centers, Care Management, Clinical Practice Guidelines, Clinical Quality, Coronavirus, Health e-Blue, Patient Experience, Pharmacy, Preventive Benefits, and UMQA. The 'Clinical Quality' and 'Pharmacy' items are highlighted with red boxes. Below the navigation bar, there are three main content areas: 'Alerts' with a 'Read Alerts' button, 'Provider Resources' with a 'Search' section, and 'Easy Access' with a list of links including 'Provider manuals', 'Coronavirus information', 'New provider guide (PDF)', 'Provider training', 'Registration\*', 'Login\*', and 'ereferrals.bcbsm.com'.



## Star Tip Sheets / Network Performance Improvement Documents

- [availity.com](#)\* > Payer Spaces > BCBSM and BCN logo > Resources > Secure Provider Resources (Blue Cross and BCN) > Member Care > Clinical Quality
- PGIP Collaboration Site > Initiatives/Projects/Workgroups > Quality Rewards

## Network Performance Improvement Presentations

- [availity.com](#)\* > Payer Spaces > BCBSM and BCN logo > Resources > Secure Provider Resources (Blue Cross and BCN) > Member Care > Clinical Quality
- PGIP Collaboration Site > Initiatives/Projects/Workgroups > Quality Rewards

Below are Network Performance Improvement (NPI) documents related to key HEDIS, Star, and incentive measures.

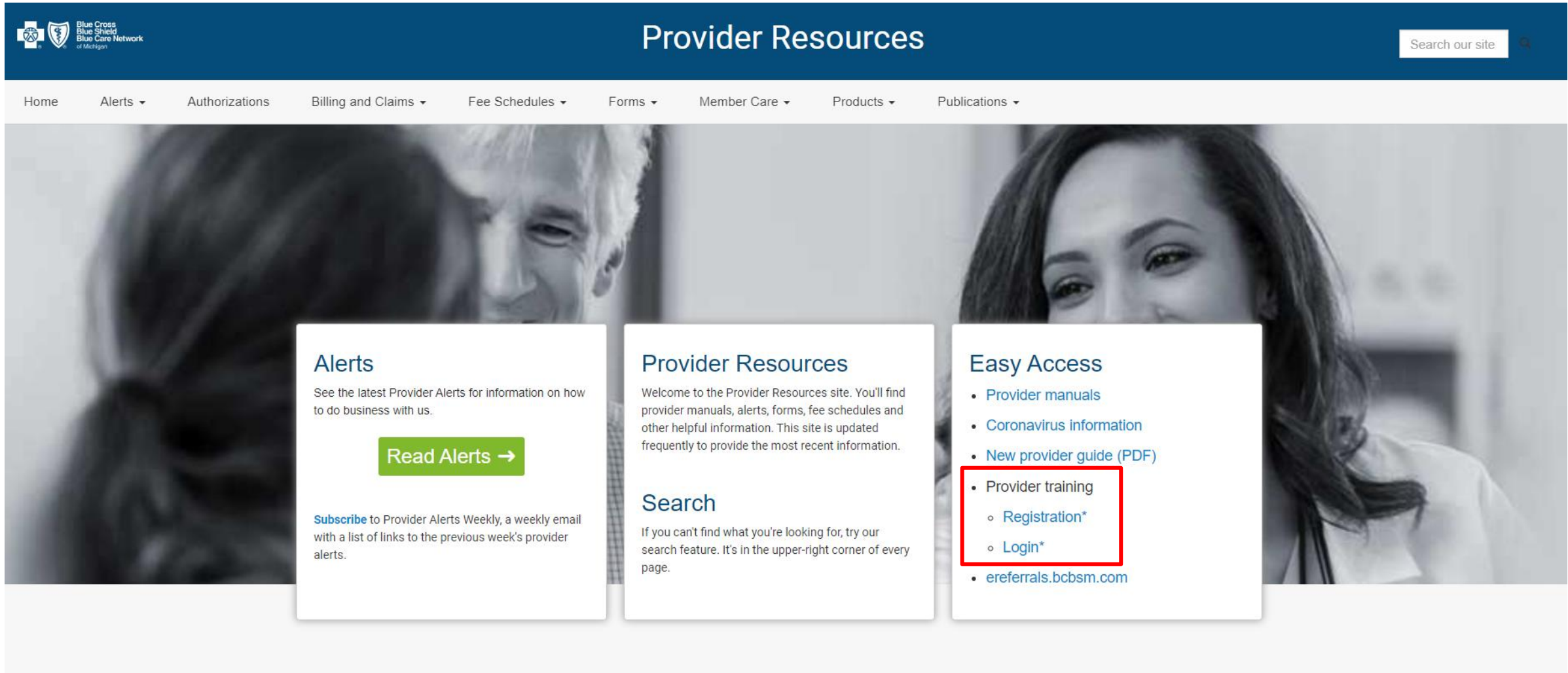
- [2024 NPI Series — Colorectal Cancer Screening \(COL-E\) \(PDF\)](#)
- [2024 NPI Series — Controlling High Blood Pressure \(CBP\) \(PDF\)](#)
- [2024 NPI Series — CPT® Category II Codes \(PDF\)](#)
- [2024 NPI Series — Eye Exam for Patients with Diabetes \(EED\) \(PDF\)](#)
- [2024 NPI Series — Kidney Health Evaluation for Patients with Diabetes \(KED\) \(PDF\)](#)
- [2024 NPI Series — Medicare Wellness Visits \(MWV\) \(PDF\)](#)
- [2024 NPI Series — Transitions of Care \(TRC\) \(PDF\)](#)
- [Medicare Wellness Visits \(MWV\) Checklist \(PDF\)](#)
- [In-Home Assessments: FAQs for providers \(PDF\)](#)

## 2024 Quality Rewards Booklet


- [availity.com](#)\* > Payer Spaces > BCBSM and BCN logo > Applications > Health e-Blue home page > Incentive Documents

## 2024 Quality Measurement Description Booklet

- [availity.com](#)\* > Payer Spaces > BCBSM and BCN logo > Applications > Health e-Blue home page > Health Management Program Supporting Documents



The screenshot shows the top portion of a website. At the top left is the Blue Cross Blue Shield of Michigan logo. The main header is dark blue with the text "Provider Resources" in white. To the right of the header is a search bar with the text "Search our site". Below the header is a navigation menu with the following items: Home, Alerts, Authorizations, Billing and Claims, Fee Schedules, Forms, Member Care, Products, and Publications. The main content area features a large background image of a doctor and a patient. Overlaid on this image are three white boxes. The first box is titled "Alerts" and contains a green button labeled "Read Alerts →". The second box is titled "Provider Resources" and contains a paragraph of text and a "Search" section. The third box is titled "Easy Access" and contains a list of links, with "Provider training" and its sub-items "Registration\*" and "Login\*" highlighted by a red box.

 **Provider Resources**

Home Alerts Authorizations Billing and Claims Fee Schedules Forms Member Care Products Publications

### Alerts

See the latest Provider Alerts for information on how to do business with us.

[Read Alerts →](#)

**Subscribe** to Provider Alerts Weekly, a weekly email with a list of links to the previous week's provider alerts.

### Provider Resources

Welcome to the Provider Resources site. You'll find provider manuals, alerts, forms, fee schedules and other helpful information. This site is updated frequently to provide the most recent information.

### Search

If you can't find what you're looking for, try our search feature. It's in the upper-right corner of every page.

### Easy Access

- [Provider manuals](#)
- [Coronavirus information](#)
- [New provider guide \(PDF\)](#)
- [Provider training](#)
  - [Registration\\*](#)
  - [Login\\*](#)
- [ereferrals.bcbsm.com](#)

Once you're logged in to the provider training site, open the event calendar to sign up for any of the sessions listed below.

**Reach for the Stars-HEDIS®/Star measure overview:** For physicians and office staff responsible for closing gaps in care related to quality adult measures.

Session	Date	Time
All Star Performance - HEDIS®/Star Rating Measure Overview	May 9	9 a.m. to 10 a.m.
All Star Performance - HEDIS®/Star Rating Measure Overview	May 15	9 a.m. to 10 a.m.
All Star Performance - HEDIS®/Star Rating Measure Overview	May 23	2 p.m. to 3 p.m.
All Star Performance - HEDIS®/Star Rating Measure Overview	May 30	3 p.m. to 4 p.m.

**Coding Complex Cases:** For physicians, coders, billers and administrative staff.

Session	Date	Time
Let's Talk Coding: Coding and Documentation Tips for 2024 and Beyond	May 7	11 a.m. to 12 p.m.
Let's Talk Coding: Coding and Documentation Tips for 2024 and Beyond	May 16	3 p.m. to 4 p.m.
Let's Talk Coding: Coding and Documentation Tips for 2024 and Beyond	May 21	9 a.m. to 10 a.m.
Let's Talk Coding: Coding and Documentation Tips for 2024 and Beyond	June 6	11 a.m. to 12 p.m.

## Access our provider training website.

If you have access to our provider portal, Availity<sup>®</sup> Essentials, follow these steps to access our provider training website where you can register for symposiums:


1. Log in to our provider portal at [availity.com](https://www.availity.com)\*
2. Click *Payer Spaces* in the menu and then click the BCBSM and BCN logo.
3. Click the *Provider Training Site* tile in the Applications tab.
4. Open the event calendar to sign up for a session.

## Questions?

For more information about the sessions, contact Ellen Kraft at [ekraft@bcbsm.com](mailto:ekraft@bcbsm.com).

For more information about accessing or navigating the provider training website, contact the provider training team at [ProviderTraining@bcbsm.com](mailto:ProviderTraining@bcbsm.com).

## Provider Resources

Search our site 

Home Alerts ▾ Authorizations Billing and Claims ▾ Fee Schedules ▾ Forms ▾ **Member Care ▾** Products ▾ Publications ▾

### MEMBER CARE

- Autism
- Behavioral Health
- Blue Cross Personalized Medicine
- Blue Distinction Centers
- Care Management
- Clinical Practice Guidelines
- Clinical Quality
  - [Clinical Quality Overview](#)
- Tip Sheets
  - [Custom Measure Tip Sheets](#)
  - [Star Tip Sheets](#)
  - [HEDIS Tip Sheets](#)
- Pharmacy Clinical Resources
- Coronavirus
- Health e-Blue
- Patient Experience**
- Pharmacy
- Preventive Benefits
- UMQA

[Home](#) > [Member Care](#) > [Patient Experience](#)

## Patient Experience

The Centers for Medicare & Medicaid Services continues to emphasize the importance of the patient experience in all their programs. Blue Cross and BCN administer the Clinician and Group Consumer Assessment of Healthcare Providers and Systems®, or CG-CAHPS, a nationally recognized survey that's widely used to collect data about patient experiences and monitor provider performance. This page will provide more details about the CG-CAHPS survey and our patient experience resources.

To learn more, email [PatientExperience@bcbsm.com](mailto:PatientExperience@bcbsm.com).

### Patient Experience improvement resources

Blue Cross is committed to making a positive impact on patient experience by supporting practices in this area. We offer live-virtual and on-demand training to help practices improve patient experience. This includes webinars, podcasts, and e-Learning modules for providers and staff, many with CMEs available.

The Patient Experience team also offers a variety of consultation services to primary care and specialty practices, in-person and virtually, customized to meet the needs of individual practices. We help practices improve communication and interactions with patients, improve office processes and identify solutions for root causes of issues.

- Visit our [Patient Experience Master Class website](#) to learn more, register for sessions, and request consultations. No account or login is required.
- Download the [Patient Experience Guidebook](#) for best practice tips to improve the care delivery domains measured by CAHPS and the Health Outcomes Survey.
- Visit our [Provider Training website](#) for e-Learning courses and resources about Patient Experience and many other topics, including HEDIS, coding, prior authorizations and more. New users will need to register one time.

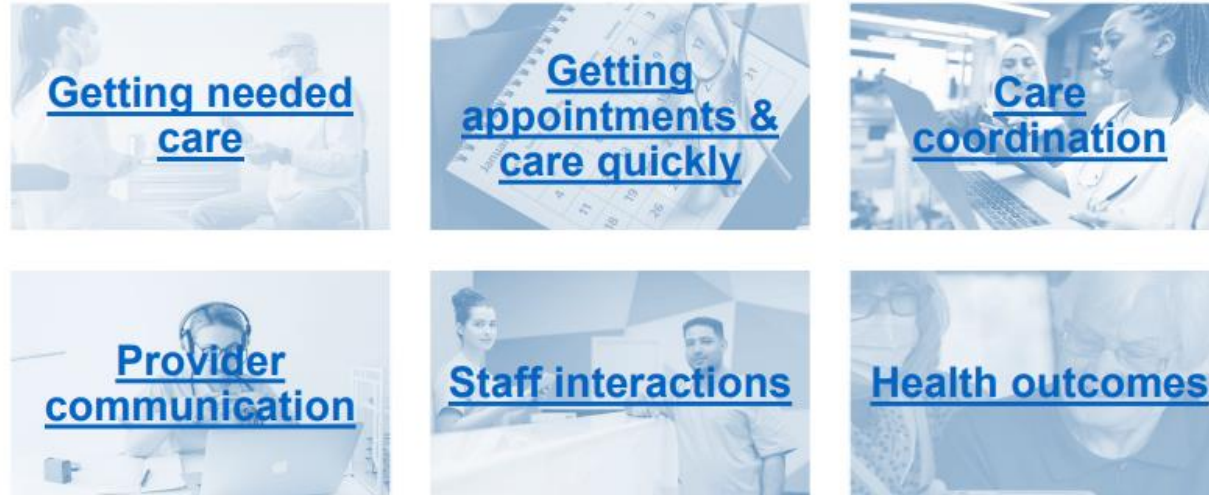
### Patient Experience survey information

- [Frequently asked questions about Patient Experience CG-CAHPS Survey \(PDF\)](#)
- [2023 Health Care Experience Survey \(PDF\)](#)
- Contracted entities can authorize up to three representatives to access their organization's patient experience survey results online by completing a [portal access request form](#). The form can also be completed to make changes to the authorized list of users.
- Access an on-demand recording to [learn how to use the patient experience survey results portal](#).



## Patient Experience Guidebook


The CG-CAHPS survey covers six categories, or domains, of the patient experience that providers can readily influence:



## Your guide to improved patient experiences

We've broken down the sections for each of the CG-CAHPS survey domains to assist your organization with identifying targeted tips for areas with the most opportunity for improvement.


After reviewing your scores, use this guide to learn about objective and measurable ways to improve your CG-CAHPS results and, ultimately, your patients' experience.

And remember, you're not in this alone. We're ready to partner with you. Within this guide, look for the  icon which indicates that we have a resource that will help address that topic.

Click on the hyperlinks on page 5 of the patient experience guidebook and it will take you directly to a resource page for that domain. (See the next slide.).

## Getting appointments & care quickly tips *continued*



 Blue Cross and BCN have tools to help in this area

Patient experience survey question	Before the visit	During the visit	Close of visit
<p><b>Wait time at appointments</b></p> <ul style="list-style-type: none"> <li>Wait time includes time spent in the waiting room and exam room. In the last 6 months, how often did you see the person you came to see within 15 minutes of your appointment time?</li> </ul>	<ul style="list-style-type: none"> <li>Use a scheduling system that allows for buffer times between appointments for unexpected delays and/or patients who need additional time with a provider.</li> <li>Offer more timely appointments with advanced practice providers and educate patients on physician assistant and nurse practitioner capabilities.</li> <li>Contact patients ahead of time when there are known delays to their scheduled appointment time. Offer them the options of coming in later or rescheduling their appointments.</li> <li>Create and utilize a triage sheet for staff and doctors to determine the urgency level for different types of requests for appointments.</li> </ul>	<ul style="list-style-type: none"> <li>Give patients activities to complete during their wait time (e.g., write down issues to address during the visit, register for the patient portal, etc.).</li> <li>Install smart TVs or white boards in waiting and exam rooms to let patients know the wait time to see their providers.</li> <li>If the wait time is longer than expected, offer alternatives to the patients such as rescheduling their visits or leaving and coming back at a specific time.</li> <li>Ask patients if they prefer to wait in the waiting room or an exam room.</li> <li>Take patient vitals within 15 minutes of arrival to break up wait times in the waiting room and the exam room.</li> <li>Use timers on exam rooms to alert staff when it's time to update patients about their expected wait times.</li> </ul>	<ul style="list-style-type: none"> <li>To get immediate feedback, ask patients about their visit experience and if anything could be improved for their next visit.</li> </ul>



# Patient Experience Webinars

## *Improving health outcomes for older adults*

- BCBSM is offering a three-part webinar series aiming to help physicians and clinical staff navigate the complexities of discussing potentially sensitive issues with older patients.
- Each session will give strategies to enhance patient communication and foster open dialog that can lead to improved care and outcomes for older adults.

Part 1	April 16 <sup>th</sup>	We'll focus on ensuring effective care through conversations with patients about urinary incontinence, physical activity and fall risk, along with a brief background on the Health Outcomes Survey.
Part 2	April 18 <sup>th</sup>	Participants will learn strategies to discuss mental and physical health with older adults. The session will also discuss using patient-centered planning to improve or maintain patients' health.
Part 3	April 23 <sup>rd</sup>	Learn about the barriers and anxiety older patients have to broaching discussions about sensitive topics, such as memory problems and advanced care planning. We'll explore providers' apprehension to bring up sensitive topics, and share tips to relieve patients' anxiety, ways to build trust and strategies providers can use to overcome their own anxieties toward sensitive conversations.

- **Register for these virtual webinars** by visiting the [Upcoming Webinars](#) page of the [Blue Cross Patient Experience site](#).
- **Recordings will be available on demand at the Patient Experience site after the live sessions.**
- Physicians who attend this 90-minute total workshop can receive CME credits. CEU's are also available for medical assistants.



# Question and Answer