

Facility Census Report Process for Blue Cross and Blue Shield of Vermont (BCBSVT)

BCBSVT allows daily census reporting by facilities through fax or email rather than requiring phone calls. This creates a streamline process and decreases administrative time spent by the facility and BCBSVT.

Below is an overview of the requirements and process:

By 8 a.m. each day, a census report is faxed or emailed to our Integrated Health Management (IHM) department at (802) 371-3491 or msconciierge@bcbsvt.com. A contact name and phone number needs to be provided with the report. The report needs to identify BCBSVT members who are:

- Newly admitted
- Continued stays
- Discharged

Upgrade from Observation/Emergency room to Admission. If your system is capable of generating a report of all members that fall into the above categories we can use your report. The report must contain at a minimum the following fields, in any order:

- Patient name (any format)
- Patient date of birth
- BCBSVT identification number, including prefix if available
- Patient Gender
- Your medical record number
- Admitting provider name
- Admitting providers national provider identifier (NPI)
- Date of admission
- Date of discharge (also need to include disposition (examples: Home with home health, deceased, home, skilled nursing facility, rehabilitation, etc.))
- Length of stay
- Inpatient type (medical, rehabilitation, mental health, substance abuse, maternity*, newborn, or any other condition)
*please note: you must include how delivered: by diagnosis code O80 (normal/vaginal), O82 (cesarean) or you can abbreviate NV (normal/vaginal) or CS (cesarean)
- Admitting diagnosis (ICD-10-CM code)
please note: for maternity use either O80 (normal/vaginal) or O82 (cesarean)
- Admit type (urgent, emergency room, elective or any other type)

For emergency room visits, in addition to the above, we need the patients contact information including phone number, reason for the emergency room visit, disposition, and if they are frequent utilizers of the emergency room.

For any abbreviations made in these fields a key must be provided advising of what the abbreviations mean. For example if you use IP a key would indicate Inpatient.

We have a sample templates of census reporting (one is specific to Emergency Room) that can be used if you prefer. They are located on the last page of this document.

The IHM department reviews all newly reported admissions (identified by the admission date being equal to the daily census report date). The continued stays (admit dates not equal to date of census report) are not reviewed daily as they have been reviewed on a previous census report and are there for informational purposes. The discharge patients are noted in our system.

If there is a change in the patient's status after the census report has been released for the day, the change can be reported on the next census report but must be clearly marked, and not just a new reporting or they may be missed. Or a call can be placed to the IHM department at (800) 922-8778 with the information.

During our review of the newly report admissions, if we find we need additional information, we will outreach to the facility contact identified on the fax sheet to obtain more information. There are some specific timeframe required for a response from the facility, they are listed below:

48 hours to return clinical information:

- Emergency Admissions (non-observation admission)
- Extended stays (as determined by the RN Medical Reviewer at BCBSVT)
- Psychiatric Admissions (non-observation admission)

45 days to return clinical information:

- Items identified on the Census where the member was admitted & discharged (e.g. over a weekend/holiday) are considered Retro-Requests

In cases where BCBSVT does not receive the additional information within the timeframe specified the admission will be denied as not medically necessary for lack of clinical information. If a claim is on file and pending it will deny followed by a letter from IHM.

If you have any questions regarding this process, please contact the IHM department at (800) 922-8778.