

Mental Health and Substance Use Disorder Provider Orientation

May 17, 2024

Welcome to Blue Cross Blue Shield of Vermont (Blue Cross VT)

We are excited to have you join our network and feel fortunate to have you as a partner in our members' care.

Visit our provider website at www.bluecrossvt.org/about to learn more about:

- Our Vision
- Our Mission Statement
- Who We Are

Claim Submission Guidelines

Claims Submission Instructions

Go to www.bluecrossvt.org/providers/provider-forms-resources and click on the Claim Forms and Information link.

Electronic Claim Submission Guidelines

Go to www.bluecrossvt.org/providers/provider-forms-resources and click on the Electronic Data Interchange Forms and Guides

Paper Claims – use one of the options below:

- Fax* to “Attention Claims Department” at (866) 334-4232
- Email (must be sent through a secure [encrypted] method) to claims@bcbsvt.com

**If you have an older fax machine and your fax fails, please resend the entire fax from the beginning. Older fax machines tend to resend from the page where the fax started to fail, resulting in an incomplete file being sent.*

Coding Requirement Resources

Your claims must be submitted with accurate coding. You may find the following resources helpful:

- American Psychological Association (apaservices.org):
[CPT and Diagnostic Codes](#)
- National Association of Social Workers (socialworkers.org):
[Clinical Social Work Practice Tools: Billing](#)
- American Psychiatric Association (psychiatry.org):
[Coding, Reimbursement, Medicare and Medicaid](#)
- ICD-10 Coding:
Optum360coding.com

Payment Options

Electronic Funds Transfer

- For timely payment, we strongly advise you to sign up for electronic funds transfer details are available on our Provider Electronic Payment link: www.bluecrossvt.org/providers/provider-electronic-payment
- Electronic deposits are made every Friday, regardless of holidays.

Paper Checks

- Paper checks are issued every Friday, regardless of holidays, and mailed from a facility in the Midwest.
- Paper checks may be subject to U.S. Postal Service delays.

Provider Resource Center

The Provider Resource Center (PRC) is our secure website for providers. Registration is required.

Benefits of using the PRC include access to:

- Eligibility and Benefit Search
- Claim Status Inquiry
- Prior Approvals/Pre-Notification/Authorizations
- Provider Payment Vouchers

To register, go to www.bluecrossvt.org/provider-login

Provider Website

Visit for www.bluecrossvt.org/providers for helpful information and tools. No registration required.

- Provider Manual and Reference Guides
www.bluecrossvt.org/providers/provider-forms-resources
- Provider Policies
 - Vermont Medical Policies www.bluecrossvt.org/providers/provider-policies
 - Enrollment and Credentialing Policies
 - Quality Improvement Policies
 - Provider Payment Policies (includes Telemedicine, Telephone, etc)
- Provider Demographic and Enrollment Changes
www.bluecrossvt.org/providers/provider-forms-resources#body-section-9952
- Contact Us (list of telephone numbers for interacting with Blue Cross VT)
locate here: www.bluecrossvt.org/providers/provider-forms-resources under Additional Resources.

Telemedicine Services

What do I need to know about billing for telemedicine services?

Here is a summary of our telemedicine policy:

- Provider must be directly contracted with the BCBS plan operating in the state in which they are physically located while providing services.
- Provider needs to be licensed directly with the state in which the patient is physically located when receiving services.
- Add 95 modifier for CPT codes
- Add GT modifier for HCPCS codes
- Use place of service 02 (used exclusively for telemedicine)
- Use of HIPAA-compliant software is required.
- Services must be covered under the member's health plan benefits.
- Services must be delivered through synchronized audio and visual sources.
- Provider must obtain patient consent before providing telemedicine services.

The full policy is available on this link: www.bluecrossvt.org/providers/provider-policies under Provider Payment Policies.

Contracting Frequently Asked Question

Can I move out of Blue Cross VT service area (Vermont and its contiguous counties) and continue to be a participating provider with Blue Cross VT?

In general, Blue Cross VT is limited to contracting with providers who provide services while **physically** located in Vermont or a county contiguous to Vermont. Blue Cross VT **may not** contract directly with a provider physically located outside the state of Vermont (or a contiguous county) who is providing services via telemedicine only.

Blue Cross VT contracted providers **temporarily** located outside of the State of Vermont but within the United States for a period not to exceed six months are allowed to continue to contract with Blue Cross VT and provide eligible services by telemedicine, submitting claims to Blue Cross VT for processing.

If at any point the relocation becomes permanent or the six-month time period is exceeded, the Blue Cross VT contract is terminated, and claims for services can no longer be submitted to Blue Cross VT. Claims must be submitted to the Blue Plan the provider is located in when the services are rendered.

Notes:

- There are allowances if a provider is affiliated and billing through a Blue Cross VT contracted practice physically located in the State of Vermont or a county contiguous to Vermont.
- Out of Country relocation, even if temporary, will terminate a direct Blue Cross VT contract.

Billing of 90846 and 90837

Can I submit separate claims for codes 90846 and 90837 when the services are performed on the same day? For example, I may see the family for counseling without the patient present in the morning (90846), then have a session with the patient alone (90837) in the afternoon.

Yes. Your notes need to support each service. The -59 modifier should be added to the 90837.

Note: Code editing logic is applied to claims and if initially denied requires the submission of a coding validation review request with supporting medical notes.

Medicare Primary Members

For Medicare primary members, do I have to submit claims to Medicare?

It depends on your status with Medicare. If you have opted out of Medicare, you may submit claims directly to Blue Cross VT, reporting each services line with a modifier –GY. Neither the provider nor the patient can submit a claim to Medicare when the provider has opted out. See our on-line Provider Handbook: <https://www.bluecrossvt.org/documents/provider-handbook> under Section 6.6 “Provider has Opted out of Medicare” for full details.

If your specialty is statutorily excluded from Medicare, you can bypass Medicare and submit claims directly to Blue Cross VT. If the member has Blue Cross VT secondary, the -GY modifier must be reported on each service codes to allow the claim to process without having first processing through Medicare.

However, if the member has a Medicare supplemental plan (identified by a prefix of ZIB), there are no benefits available in the absence of Medicare coverage. The supplemental plan picks up balances owed by the member only when the services are covered by Medicare. Claims for these members must first process through Medicare, and the -GY modifier is not applicable.

Be sure to always check the member’s eligibility to ensure they have coverage for the services you provide.

Questions?

Contact Your Provider Relations Consultant

Cindy Foster

802-371-3300

FosterC@bcbsvt.com

Contact Cindy if your practice is in one of these counties:

- **Vermont:** Bennington, Orange, Rutland, Washington, Windham or Windsor
- **New York:** Rensselaer or Washington
- **New Hampshire:** Cheshire, Grafton, or Sullivan
- **Massachusetts:** Berkshire or Franklin

Nichole Hallock

802-371-3318

HallockN@bcbsvt.com

Contact Nichole if your practice is in one of these counties:

- **Vermont:** Addison, Caledonia, Chittenden, Essex, Franklin, Grand Isle, Lamoille or Orleans
- **New York:** Clinton or Essex
- **New Hampshire:** Coos

Thank You!

Thank you for the services you provide to
Blue Cross VT members.
We're pleased to have you in our network of providers.