

NOTICE OF PAYMENT POLICY CHANGES

Date: January 1, 2025

The chart(s) below provide a high-level overview of new/revised/archived Payment Policies. We encourage you to review the payment policies in their entirety. Updated and new payment policies are posted at <https://www.bluecrossvt.org/providers/provider-policies>

Policy Name: CPP_09 Multiple Procedure Payment Reduction (MPPR)—
Diagnostic Imaging Services

Policy Type: Payment Policy

Summary:	Policy archived.
Effective Date:	March 1, 2025
Link to Policy/ Manual:	Multiple Procedure Payment Reduction-Diagnostic Imaging Procedures

Policy Name: CPP_19 Provider Audit, Sampling, & Extrapolation and Re-Audit Process

Policy Type: Payment Policy

Summary:	No substantial changes to the Policy. Performed some editing and punctuation. TVHP deleted.
Effective Date:	March 1, 2025
Link to Policy/ Manual:	Provider Audit, Sampling and Extrapolation, and Re-Audit Process

Policy Name: CPP_43 Blood and Blood Components

Policy Type: Payment Policy

Summary:	New policy. Payment policy statement established for Blood and Blood Components, Platelet Derived Growth Factors and Prolotherapy.
Effective Date:	March 1, 2025
Link to Policy/ Manual:	CPP_43 Blood and Blood Components

Notice of Right to Object in Writing

In accordance with 18 V.S.A. § 9418c contracted providers have the right to object to new or modified policies and manuals.

Providers who object must do so within 60 days of the date the notice related to a policy or manual change. The rationale for the objection to the change must be in writing including related area(s) of the policy or manual and rationale or reasoning for the objection.

These objections are to be directed to Provider Contracting. This can be done by email at: providercontracting@bcbsvt.com or US Postal Service BCBSVT Attn: Provider Contracting, PO Box 186, Montpelier, VT 05601.

Within 5 business days of receipt, the sender will receive confirmation of receipt of the objection.