

# VERMONT BLUE ADVANTAGE

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Provider Relations  
February 19, 2025

1

# WHAT IS VERMONT BLUE ADVANTAGE (VBA)?

- Blue Cross and Blue Shield of VT (Blue Cross VT) has a Medicare Advantage company called Vermont Blue Advantage (VBA).
- VBA is a 4 STAR rated plan.
- There are two product offerings: HMO and PPO.

# WHAT'S DIFFERENT WITH VBA

## Offers product selections for seniors in Vermont

- VBA operates independently from Blue Cross VT
- VBA handles all functions, such as eligibility, benefits, claims, and health management, while Blue Cross VT maintains the contracting relationship.
- Available to all Vermont residents having both Medicare Parts A and B
- Additional benefits including dental, vision, hearing, and fitness
- HMO and PPO plans with lower cost-sharing when using VBA network providers
- Pharmacy benefits included in all plans

# WHAT'S DIFFERENT FOR PROVIDERS FROM OUR COMMERCIAL BUSINESS?

- The network of physicians, hospitals, and other providers
  - Provider directory: <https://vba-providers.bluerelay.com>
    - **Note:** when locating providers by nearest zip code, the program works based upon the central location of the zip code. In some cases, you need to expand the mile range to find all providers located in a specific zip code.
- Some provider types such as but not limited to dental, and vision may need to contract with other entities beyond VBA to be in network for VBA member.
- Prior authorization and medical review policies
- Contacts, tools and website for provider servicing and medical review
- **Billing guidelines and requirements follow CMS**
- Mailing address for paper claim submissions

# SAMPLE ID CARDS

ID cards contain basic information about the member including if they are an HMO or PPO member

Other methods to verify member eligibility, benefits and co-payments

- VBA provider portal
- Phone: 844-839-5122

**Vermont Blue advantage**  
An Independent Licensee of the Blue Cross and Blue Shield Association.

Vermont Blue Advantage Unity HMO

Enrollee Name <b>FIRST M LAST JR</b>	Plan <b>XXXXX XXX</b>
Enrollee ID <b>BVT888888888</b>	RxBIN: <b>610014</b>
Issuer (80840) 0000000000	RxPCN: <b>MEDDPRIME</b>
	RxGrp: <b>COVMDD1</b>
	RxD: <b>VERBLHMO</b>
Group Number <b>12345</b>	Issued: <b>MM/YYYY</b>

Dental, Vision, Hearing

MEDICARE ADVANTAGE HMO

MedicareRx Prescription Drug Coverage X

**Vermont Blue advantage**  
An Independent Licensee of the Blue Cross and Blue Shield Association.

Vermont Blue Advantage Freedom PPO

Enrollee Name <b>FIRST M LAST JR</b>	Plan <b>XXXXX XXX</b>
Enrollee ID <b>V4B8888888888</b>	RxBIN: <b>610014</b>
Issuer (80840) <0000000000>	RxPCN: <b>MEDDPRIME</b>
	RxGrp: <b>COVMDD1</b>
	RxD: <b>VERBLPPO</b>
Group Number <b>12345</b>	Issued: <b>MM/YYYY</b>

Dental, Vision, Hearing

MEDICARE ADVANTAGE MA PPO

MedicareRx Prescription Drug Coverage X

# BACK SIDE OF HMO ID CARD

Members: [VermontBlueAdvantage.com](https://www.vermontblueadvantage.com)

**Vermont Blue Advantage**  
An Independent Licensee of the  
Blue Cross and Blue Shield Association

Use of this card is subject to terms of applicable contracts, conditions and user agreements.

Medicare limiting charges apply.

Providers outside of Vermont, file claims with your local plan.

Mail Provider claims to:  
PO Box 260755  
Plano, TX 75026

**Customer Service: 844-839-5126**  
**TTY/TDD: 711**

Misuse may result in prosecution.

If you suspect fraud:

844-411-6950

[Dental inquiries:

844-254-9465]

[Vision inquiries:

800-877-7195]

[Hearing inquiries:

877-246-6955]

Provider services:

844-839-5122

Medical authorizations:

800-787-4632

Rx prior authorizations:

877-779-2864

Pharmacy services:

877-779-2864

Providers Only:

Pharmacy Benefit Manager

Pharmacists/Rx Claims: 800-922-1557

## Notes:

- As of January 1, 2024, the claim mailing address is PO Box 211362, Eagan, MN 55121, however, new member ID cards will not be issued until later in the year. New member ID cards will have correct information.
- Rx prior authorizations and Pharmacy services are for **non-Medicare** Part B drugs

# BACK SIDE OF PPO ID CARD

Members: [VermontBlueAdvantage.com](https://VermontBlueAdvantage.com)

**Vermont Blue Advantage**  
An Independent Licensee of the  
Blue Cross and Blue Shield Association

Use of this card is subject to terms of applicable contracts, conditions and user agreements.

Medicare limiting charges apply.

Providers outside of Vermont, file claims with your local plan.

Mail Provider claims to:  
PO Box 260755  
Plano, TX 75026

**Customer Service: 844-839-5125**

**TTY/TDD: 711**

Misuse may result in prosecution.

If you suspect fraud: 844-411-6950

[Dental inquiries: 844-254-9465]

[Vision inquiries: 800-877-7195]

[Hearing inquiries: 877-246-6955]

Provider services: 844-839-5122

Medical authorizations: 800-787-4632

Rx prior authorizations: 877-710-3796

Pharmacy services: 877-710-3796

Providers Only:

Pharmacy Benefit Manager

Pharmacists/Rx Claims: 800-922-1557

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# PRIOR AUTHORIZATION FOR SERVICES

- No referral requirements
- Services requiring prior authorization
  - Current lists are available on the VBA provider website: <https://www.vermontblueadvantage.com/provider-resources> under Prior Authorization Resources, Services Requiring Prior Authorization



# SUBMITTING PRIOR AUTHORIZATION REQUESTS

Prior to submission, confirm on the VBA website that the service/drug requires prior approval, it is does below are the submission methods:

- Electronically
  - using Symphony an online tool on the VBA website
- Phone Call
  - Medical Care: 800-787-4632
  - Part B drugs: 800-787-4632
- Paper Form/Fax
  - download a prior authorization form from the VBA website and fax
    - Medical care fax: 866-900-2491
    - Part B drugs fax: 877-287-9056

# PRIOR AUTHORIZATION REQUEST TIMEFRAMES

## Lead times for request submissions

Type of Request	Decision	Initial Notification	Written Notification	Type of Service
<b>Pre-service expedited*/concurrent</b>	Within 72 hours from receipt of request	Within 72 hours from receipt of request	Within 3 days of initial notification	Acute and post-acute admissions
<b>Pre-service standard (non-expedited)</b>	Within 14 days of receipt of request	Within 14 days of receipt of request	Within 14 days of receipt of request	Part B medications and members already admitted
<b>Post-service</b>	Within 30 days of receipt of request	Not applicable	Within 30 days of receipt of request	Services already provided

Timeframes are calendar days.

\*Expedited requests must be supported by clinical justification for expediting the request

# PRIOR AUTHORIZATION RESPONSES

- Response from VBA through the following:
  - Fax
  - Symphony (VBA's online PA tool)
  - Phone call for expedited request; after several attempts to reach the provider, a letter will be sent
- Denial – peer to peer conversation available prior to denial
- Providers can call regarding a denial; the phone number is included in the denial letter

# CLAIM SUBMISSIONS

**All claims must meet CMS claim submission guidelines.** Where claims are submitted are determined by the following:

- **Ambulance Claims** – follow BlueCard claim filing guidelines
- **Ancillary Claims** – Defined as Durable Medical Equipment, Independent Clinical Laboratory and Specialty Pharmacy follow BlueCard claim filing guidelines
- **Dental, Hearing Aid and Non-Medical Vision** – have specific claim filing guidelines – see slides 17 and 18
- **Remote Providers** – those rendering service through Telemedicine have specific claim filing guidelines see the VBA on-line provider handbook
- All others provider types see claim submission grid – see slide 16

# CLAIMS SUBMISSION

Note: Ambulance, DME, Independent Clinical Laboratory, Specialty Pharmacy, Dental, Hearing Aid and Non-Medical Vision or Remote Providers may not follow the below.

Claim Source	Phone or Email	Fax Claims	Paper Claims	EDI/Electronic
Claims for VBA members from VBA network providers	844-839-5122	800-479-8973	VBA P.O. Box 211362 Eagan, MN 55121	Submit to Blue Cross VT using CMS claim submission guidelines. Use the Blue Cross VT plan code such as BCBSVT or SB915 – we direct to VBA for processing
Claims for non-Vermont BCBS Medicare Advantage members using in-network BlueCard providers	844-839-5122	800-479-8973	VBA P.O. Box 211362 Eagan, MN 55121	Submit to Blue Cross VT using CMS claim submission guidelines. Use the Blue Cross VT plan code such as BCBSVT or SB915 – we direct to VBA for processing
Claims for VBA members using BlueCard providers outside of Vermont provider network	844-839-5122	Submit to provider's Blue Plan	Submit to provider's Blue Plan	Submit to provider's Blue Plan
Claims submission for VBA members and non-Vermont BCBS Medicare Advantage members from out-of-network providers in Vermont	844-839-5122	800-479-8973	VBA P.O. Box 211362 Eagan, MN 55121	Not applicable

# DENTAL CLAIMS

## Traditional Medicare Dental Benefits: VBA

- Electronic: submit to Blue Cross VT as usual and we will forward
- Paper: PO Box 211362, Eagan, MN 55121

## Enhanced Dental Benefits: DentaQuest

- Electronic: If using a clearinghouse BBMDQ
- On-line: [provideraccess.dentaquest.com](http://provideraccess.dentaquest.com)
- Paper: DentaQuest, PO Box 491, Milwaukee, WI 53201-0491

# HEARING AID AND NON-MEDICAL VISION CLAIM SUBMISSIONS

- **Hearing Aid – Nations Hearing (877) 246-6955**
  - Email: [OONCLAIMS@Nationsbenefits.com](mailto:OONCLAIMS@Nationsbenefits.com)
  - Fax: (877) 391-9637 must put attention claims
  - Mail: Attn: Claims, 1801 Northwest 66 Avenue, Suite 100, Plantation, FL 33313
- **Vision – Vision Service Plan (VSP) (800) 877-7195**
  - Visit their website at <http://vsp.com>

# MEDICAL RECORD REQUESTS

- There may be times you receive a request for medical records in order for your claim to be processed. If you received this request, make sure:
  - You return the letter you received with the request regardless of return method. It has bar coding that allows for quick identification and processing.
  - Make sure you return using one of these methods:
    - US Postal Service to: VBA Provider Correspondence, PO Box 211362, Eagan, MN 55121
    - Fax (800) 479-8973



# ELECTRONIC FUND TRANSFER/DIRECT DEPOSIT

If you currently are enrolled with Blue Cross VT for EFT (direct deposit), you don't need to do anything more.

- If you are interested in receiving payment via EFT, please click on the link.

<https://www.bcbsvt.com/provider/electronic-payment-eft>

NOTE: If you receive EFT, you must view/save/print your provider explanation of payments from the VBA secure website. They are not mailed to you. 835's are posted to the Blue Cross VT MoveIt site for pick up.

# TIMING OF CLAIM PAYMENTS

- Claims are paid every week on the following cadence:
  - Monday
    - Initiate check run
    - 835 for VBA processing posted to Blue Cross VT MoveIt site for pick up by clearinghouse
  - Thursday
    - Payment date for EFT
    - Check date for paper checks
    - Checks/Explanations of Payment mailed from Michigan
    - Explanations of Payment available on VBA provider portal – note, the EOP's are in a format that is different from the Blue Cross VT provider vouchers

# VBA RESOURCES

- **VBA Provider Servicing:** eligibility, benefits, claims, prior authorizations – except enhanced dental benefits, hearing aid and non-medical vision see next slide

- Open Monday through Friday, 8 am through 5 pm EST
- Phone: 844-839-5122

NOTE: VBA Provider Servicing handles claim inquiries for Medicare Advantage members of another Blue Plan.

- **VBA prior authorizations**

- Phone: 800-787-4632
- Fax: 866-900-2491

- **VBA mailing address**

- VBA Provider Correspondence

PO Box 211362

Eagan, MN 55121

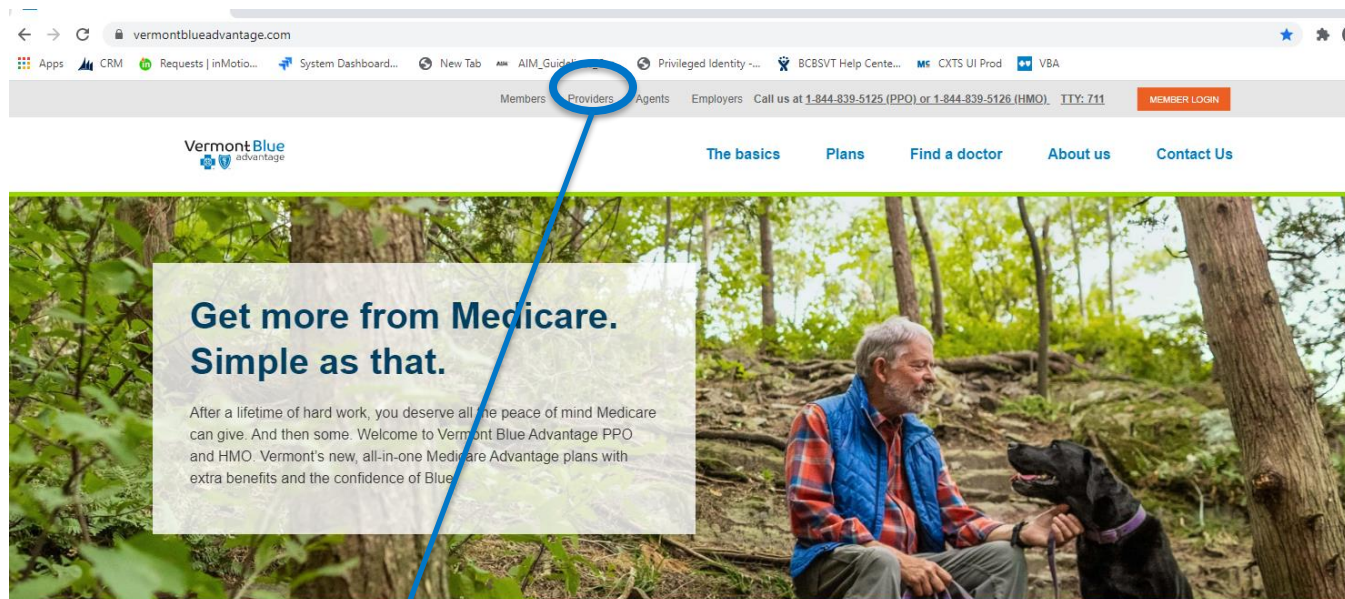
## ENHANCED DENTAL BENEFITS, HEARING AID AND NON-MEDICAL VISION RESOURCES

- **Dental** – DentaQuest
  - (800) 936-0941
- **Hearing Aid** – Nations Hearing
  - (877) 246-6955
- **Vision** – Vision Service Plan (VSP)
  - (800) 877-7195 or Visit their website at <http://vsp.com>

# VBA RESOURCES CONT'D

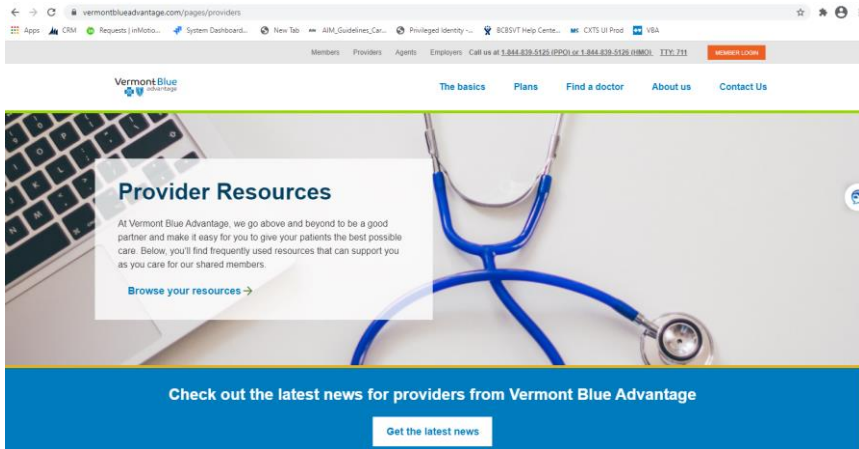
- VBA's website: [vermontblueadvantage.com](http://vermontblueadvantage.com)

Note: Google Chrome or Mozilla Firefox are the recommended browsers for this site

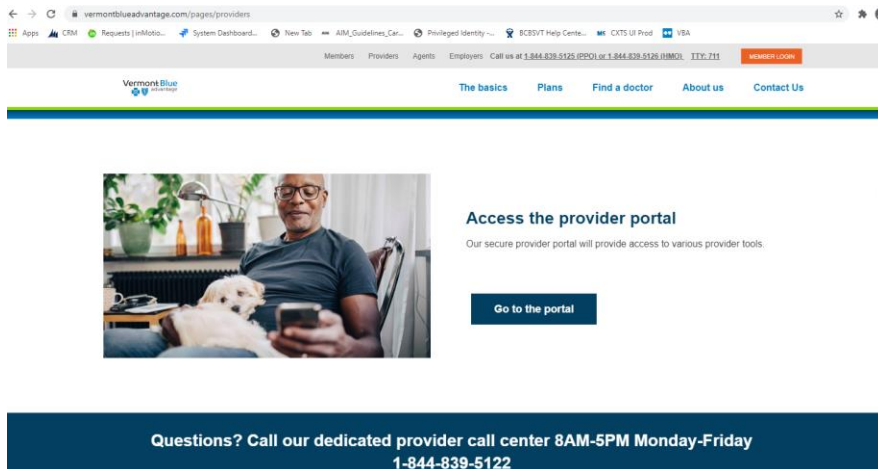


Click on "Provider" to enter the provider landing page

# VBA PROVIDER WEBSITE LANDING PAGE



The links on the top of the page take you to a non-secure area that houses basic information you need to know to do business with VBA – medical policies, provider manual, claim submission, etc.



If you scroll down, you can link into the secure area of the VBA website the Provider Portal where you get eligibility, benefits, and the online PA tool-Symphony


# PROVIDER RESOURCES PAGE

This page contains:

- General Resources
- Plan Benefit Information
  - Evidence of Coverage documents that provide details on benefits and member liabilities
  - Policy Papers provide details about enhanced benefits
    - ▶ Annual physicals exams
    - ▶ Chiropractic care
    - ▶ Dental
    - ▶ Vision
    - ▶ Hearing
- Claim Resources
- Prior Authorization Resources

# SAMPLE EVIDENCE OF COVERAGE PPO AND POLICY PAPER

## Medical Benefits Chart

Services that are covered for you	What you must pay when you get these services	
	Vermont Blue Advantage Freedom PPO	Vermont Blue Advantage Freedom Plus PPO
 <b>Abdominal aortic aneurysm screening</b> A one-time screening ultrasound for people at risk. The plan only covers this screening if you have certain risk factors and if you get a referral for it from your physician, physician assistant, nurse practitioner, or clinical nurse specialist	There is no coinsurance, copayment, or deductible for members eligible for this preventive screening.	

## Conditions for Payment

This table below specifies payment conditions for dental care.

Conditions for Payment		
Eligible provider	Dentist	
Payable location	No restrictions	
Frequency	<b>Fluoride</b> – 1 calendar year <b>Amalgam/resin filling</b> – 1 time per tooth per surface every 48 months <b>Root canal</b> – Once per lifetime per tooth <b>Crowns</b> – One time per tooth every 84 months	<b>2 routine exams:</b> D0120, D0140, D0150, D0160, <b>2 cleanings:</b> D1110, D1120, D4346, D4910 <b>X-rays:</b> every 2 calendar years <b>1 set of up to 4 bitewings:</b> D0270-D0274 <b>or</b> (not both) <b>6 periapical:</b> D0220, D0230
CPT codes	D1206, D1208, D2140 through D2335, D2391 through D2394, D3310 through D3330, D7140, D2980, D2710-D2794	
Diagnosis restrictions	No restrictions	
Age restrictions	No restrictions	

Please note: the samples on this page are only SAMPLES, please review full documents for all details.



# VBA PROVIDER PORTAL

- Each staff member that will be using the VBA Provider Portal must complete their own account – this website does not use a “system administrator” to issue accounts
  - Note: If you are not contracted with VBA, you will not be approved for access in the Provider Portal.

secure.healthx.com/v3app/publicservice/loginv1/login.aspx?bc=29dc434d-8b31-4f1c-abc0-0d68b04f4ba6&serviceid=181cf280-59c6-4257-8610-9edbd625209

As a provider and medical professional, the Vermont Blue Advantage (VBA) provider site will give you the ability to check patient's eligibility, coverage, check claim status, submit and view authorizations and referrals, and more.

### Join the Vermont Blue Advantage (VBA) Provider Network

Vermont Blue Advantage (VBA) shares the same mission as doctors, dentists and other health care professionals, hospitals and facilities. We all strive for the better health and well-being of your patients - our customers.

### Online services

- Check member eligibility and benefits
- Review claim status
- Find forms and other resources
- Search the provider and facility directory
- Access guidelines, materials

### Sign into your account

Username

Password

[Sign in](#) [Create account](#)

[Forgot your username or password?](#)

# BLUE CROSS VERMONT RESOURCES

- **Blue Cross VT Provider Relations:** EFT enrollment, network participation and contract questions
  - [providerrelations@bcbsvt.com](mailto:providerrelations@bcbsvt.com)
  - Phone: 888-449-0443, option 1
  - 8:00 a.m. – 4:30 p.m., EST
  - Monday through Friday, except holidays
- **Blue Cross VT Provider Files Team:** update provider and practice demographics (address, open/closing of panel, terminations)
  - [providerfiles@bcbsvt.com](mailto:providerfiles@bcbsvt.com)
  - Phone: 888-449-0443, option 2