



BlueREVIEWSM

FOR CONTRACTING INSTITUTIONAL AND PROFESSIONAL PROVIDERS

NOVEMBER 2012

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PPO Credentialing: Do you need to take action?

Previously, credentialing was only required by BCBSIL for HMO Illinois and BlueAdvantageSM HMO and BlueChoice providers. In late 2011, BCBSIL introduced a **new credentialing requirement for PPO providers seeking to join or remain eligible for continued participation** in the BCBSIL PPO network.

At this time, PPO providers who may need to be credentialed include independently contracted physicians, physician assistants, advanced practice nurses, chiropractors, podiatrists, audiologists, optometrists, all behavioral health providers and certified nurse midwives.

The Council for Affordable Quality Healthcare, Inc. (CAQH®) is the organization that collects the necessary credentialing data for BCBSIL through its Universal Provider Datasource®(UPD®). The UPD application is a single, standard online form designed to meet the needs of all participating health care organizations. There is no cost to providers to use the UPD database.

Current BCBSIL PPO network providers are being credentialed in phases. See the table below for tips on what you may need to do right now. **If you receive a letter from CAQH with a response deadline, it's important to act quickly, as the process can take time to complete.** If you're not sure if you received a letter, contact the CAQH Help Desk at 888-599-1771, or send an email to caqh.updhelp@acsgs.com.

Which scenario best describes you?	Here's what you need to do:
<input checked="" type="checkbox"/> Currently participating with BCBSIL as a PPO provider; <input checked="" type="checkbox"/> Not credentialed as an HMO or BlueChoice provider; and <input checked="" type="checkbox"/> Not registered with CAQH for credentialing with another health plan	1. Wait for your welcome letter from CAQH 2. Follow instructions on how to register your CAQH Provider ID and obtain access to the UPD database 3. Complete the online CAQH provider credentialing application
<input checked="" type="checkbox"/> Currently participating with BCBSIL as a PPO provider; <input checked="" type="checkbox"/> Not credentialed as an HMO or BlueChoice provider with BCBSIL; and <input checked="" type="checkbox"/> Already registered with CAQH for credentialing with another health plan	Enable BCBSIL to access your existing credentialing information, as follows: 1. Log in to the UPD database at upd.caqh.org/oas/ 2. Click the <i>Authorize</i> tab (under the CAQH logo) 3. Select "BCBSIL" or "global authorization" 4. Click "Save" to submit your changes
<input checked="" type="checkbox"/> Currently participating with BCBSIL as a PPO provider; and <input checked="" type="checkbox"/> Credentialed as an HMO or BlueChoice provider	No action is needed at this time.

Failure to complete the credentialing process may lead to termination from the PPO network. Please visit the Network Participation/Credentialing section of our website at bcbsil.com/provider for additional information.

CAQH is a not-for-profit collaborative alliance of the nation's leading health plans and networks. The mission of CAQH is to improve health care access and quality for patients and reduce administrative requirements for physicians and other health care providers and their office staffs. CAQH is solely responsible for its products and services, including the UPD.

2012 Results Available for Annual Hospital Quality Report

As part of BCBSIL's transparency initiative, the 2012 BCBSIL annual Blue Star Hospital ReportSM is now available. BCBSIL is committed to helping members make informed health care decisions. Based on data from the 2011 HMO Member Survey, 80 percent of HMO members who had seen the Hospital Report found the information useful.

The purpose of the Blue Star Hospital Report is to provide employers and members with information about indicators for which hospitals have demonstrated high levels of performance.

The 2012 Blue Star Hospital Report – based on the 2012 Annual BCBSIL Hospital Profile – summarizes the results related to quality, patient safety and efficiency measures for 111 Illinois hospitals.

Hospital profiles are compiled using data collected from multiple sources, including: BCBSIL claims data, information provided by the hospitals and publicly available information from entities such as the Centers for Medicare & Medicaid Services.

For the 2012 Blue Star Hospital Report, each hospital's performance is reported for indicators in six categories: Structure, Process, Outcome, Patient Experience, Efficiency and Informed Decision-Making. One blue star can be earned for each indicator, for a maximum of 11 blue stars.

The 2012 Blue Star Hospital Report is available in the Clinical Resources/Quality Improvement section of our website at bcbsil.com/provider.



How to Identify Your ICD-10 'Champion'



The ICD-10 conversion is a federally mandated change for all entities covered by the Health Insurance Portability and Accountability Act (HIPAA). With a final deadline of Oct. 1, 2014, the conversion will require upgrades to IT systems, new documentation practices, increased clinical knowledge and extensive staff training.

During our most recent series of ICD-10 webinars, BCBSIL found that approximately **58 percent of providers participating in the webinars had not selected a clinical champion** to lead their conversion effort. Change on this scale requires dedicated and sustained leadership. The conversion to ICD-10 impacts every area of your practice, and establishing your own champion to drive your plan is a critical step towards implementation.

WHAT MAKES A GOOD CHAMPION?

Here are some guidelines to help you find a leader for your ICD-10 conversion:

- **The Right Level** – Champions come from varying levels of an organization. High-level champions set the priorities for the group and allocate resources based on those priorities. A mid-level champion, such as a clinical department manager, may be able to work comfortably with all levels of an organization and have the time to make the conversion a daily priority. In some of the most complex environments, external or third party champions may prove most effective.
- **The Right Skills** – The ICD-10 conversion requires a champion who can bring together teams with very different functions. The financial, technology, clinical, health information management and compliance personnel are all affected by the ICD-10 conversion and need to be engaged at the start of your plan. Your champion will need to motivate all of these groups to sustain the effort to meet the 2014 deadline. They must have the ability to communicate with a wide variety of stakeholders while possessing broad knowledge about the organizational demands of the ICD-10 conversion.

WHAT ABOUT SMALL PRACTICES?

Practices that have between one and five providers may think finding a champion only applies to larger organizations. No matter the size, transitioning to ICD-10 is a critical and demanding process for all practices. You may become your own champion, collaborate with other similarly sized practices or hire an outside expert. Regardless of how you do it, finding your champion will help ensure a successful and timely ICD-10 implementation.

For additional information on ICD-10, visit the Standards and Requirements/ICD-10 section of our website at bcbsil.com/provider. Our ICD-10 webinars are also a great resource. View December session dates and times and register online now. See the *Provider Learning Opportunities* on page 7 for December session dates, times and online registration information.

NEW ACCOUNT GROUPS



Group Name	Group Number	Alpha Prefix	Product Type	Effective Date
Chemring Energetic Devices, Inc.	P45802, P45798	CDS	PPO (Portable)	Nov. 1, 2012
Northwest Community Hospital	P40008	NCY	PPO (Portable)	Jan. 1, 2013
Sears Holdings Corporation	835615-16 835617-18, 835620-22	SKR SKR	BlueEdge PPO/HSA (Portable) PPO (Portable)	Jan. 1, 2013
Sprint	764101, 764106 764102, 764107 764103, 764108 764104, 764109 764105, 764110 764111, 764116, 764121 764112, 764117, 764122 764113, 764118, 764123 764114, 764119, 764124 764115, 764120, 764125	SKL SKP SHM SPW SXX SKL SKP SHM SPW SXX	BlueEdge PPO/HRA (Portable) BlueEdge PPO/HRA (Portable) BlueEdge PPO/HRA (Portable) BlueEdge PPO/HRA (Portable) BlueEdge PPO/HRA (Portable) BlueEdge PPO/HSA (Portable) BlueEdge PPO/HSA (Portable) BlueEdge PPO/HSA (Portable) BlueEdge PPO/HSA (Portable) BlueEdge PPO/HSA (Portable)	Jan. 1, 2013
Sysmex America, Inc.	P39740 P39866	FHA FHA	PPO (Portable) BlueEdge PPO/HSA (Portable)	Jan. 1, 2013
Tellabs Inc.	996399 016397	TLS TLS	BlueEdge PPO/HSA (Portable) PPO (Portable)	Jan. 1, 2013
YMCA of Metropolitan Chicago	P39408 P43165 B42939	XOF XOF XOH	BlueEdge PPO/HCA (Portable) PPO (Portable) BlueAdvantage HMO	Jan. 1, 2013

NOTE: Some of the accounts listed above may be new additions to BCBSIL; some accounts may already be established, but may be adding member groups or products. The information noted above is current as of the date of publication; however, BCBSIL reserves the right to amend this information at any time without notice. The fact that a group is included on this list is not a guarantee of payment or that any individuals employed by any of the listed groups, or their dependents, will be eligible for benefits. Benefit coverage is subject to the terms and conditions set forth in the member's certificate of coverage.

IN THE KNOW ✓

Real-time Processing for Out-of-area Electronic Claims

BlueCard®, the national program that enables members of one Blue Cross and Blue Shield (BCBS) Plan to obtain health care services while traveling or living in another BCBS Plan's service area, just got better.

As of Oct. 15, 2012, all BlueCard claims submitted to BCBSIL are now being processed and transmitted in **real time** between BCBS Plans. This enhancement will help improve processing across the Blues system by decreasing overall claim cycle times and improving the payment time frame.

Complex Case Management for HMO Members

Attention, HMO Physicians: Complex Case Management services may be available for your BCBSIL HMO Illinois and BlueAdvantage HMO patients through your Medical Group (MG) or Independent Practice Association (IPA). Your HMO patients may be added to this program if the HMO member has a complex chronic condition requiring multiple services and/or a specific acute condition. Please contact your MG/IPA for more information about this program.

The case management program is not a substitute for the sound medical advice of a doctor. Members are instructed to discuss any questions or concerns with their health care provider.



Ancillary Provider Network Consultants

BCBSIL contracts with more than 2,000 ancillary providers in Illinois and Northwest Indiana. Our Ancillary Provider Network Consultant (PNC) team focuses specifically on the services provided by Skilled Nursing Facilities, Home Health Agencies, Hospice, Home Infusion Therapy, Durable Medical Equipment suppliers, Orthotics and Prosthetics, Dialysis Centers and Private Duty Nursing agencies.

Meet your Ancillary PNC:

The following Ancillary PNCs are available to meet with your staff regarding BCBSIL policies and procedures, billing and contractual issues:

- Elaine Williams, 312-653-4305
- Jean Gavina, 312-653-2331

You may also direct your requests and inquiries to our general email box at ancillarynetworks@bcbsil.com, or leave a message at 312-653-4820.



Professional Provider Network Consultants: Here to assist you!

Professional Provider Assignments by County and Zip Code (Revised August 2012)

Our Professional Provider Network Consultants (PNCs) serve as the liaison between BCBSIL and our independently contracted provider community, developing and maintaining cooperative working relationships with professional providers in our network throughout Illinois and Northwest Indiana. The team also includes a designated Billing Services Representative who provides specialized training to Chicago Metro area billing services.

Your Professional PNC has a thorough knowledge of the PPO product and is available to meet with you on a routine basis to educate your staff on BCBSIL procedures, help ensure provider contract compliance and work with you to resolve any operational issues.

For the name of your Professional PNC, refer to the Illinois county map on the facing page. The Professional Provider Network Consultant List and map are also available in the Education and Reference Center on our website at bcbsil.com/provider. **Note:** Due to the number of providers in DuPage County and Cook County (Code 22 and Code 16), provider assignments are broken down by suburban city and Chicago zip codes, as indicated below.

IL TERRITORY BREAKDOWN BY COUNTY CODE

Northern (8, 43, 49, 56, 81, 89 and 98) – **Gina Plescia**

Southern (2, 3, 7, 11, 12, 13, 14, 15, 17, 18, 24, 25, 26, 28, 30, 31, 33, 35, 39, 40, 41, 42, 44, 51, 59, 60, 61, 64, 67, 68, 73, 76, 77, 79, 80, 82, 83, 84, 87, 91, 93, 95, 96, 97 and 100) – **Teresa Trumbley**

Western (6, 36, 37, 48, 52, 62, 66, 78, 88 and 94) – **Cathy Dismuke**

Midwest (1, 5, 9, 10, 20, 21, 23, 27, 29, 34, 38, 53, 54, 55, 57, 58, 63, 65, 69, 70, 72, 74, 75, 85, 86, 90, 92 and 102) – **Amanda Williams**

North Metro (4, 19, 45, 47, 50, 71 and 101) – **Cathy Dismuke**

South Metro (32, 46 and 99) – **Dorothy Paul**

Northwest Indiana – **Lynn Sorensen**

Cook County (16) – *See below for Cook and DuPage County Breakdown*

DuPage County (22) – *See below for Cook and DuPage County Breakdown*

COOK AND DUPAGE COUNTY BREAKDOWN BY CITY AND ZIP CODE

Ana Hernandez – Zip Codes: 60601, 60602, 60603, 60604, 60605, 60606, 60607, 60610, 60611, 60612, 60614, 60616, 60622, 60634

Cathy Dismuke – Cities: Addison, Bartlett, Bloomingdale, Elburn, Geneva, Hanover Park, Hillisburg, Medinah, Roselle, St. Charles, Streamwood, Wayne

Dorothy Paul – City: Lemont

Gina Plescia – Cities: Arlington Heights, Elk Grove Village, Hoffman Estates, Schaumburg

Lynn Sorensen – Cities: Aurora, Burr Ridge, Calumet City, Chicago Heights, Darien, Dolton, Flossmoor, Ford Heights, Glen Ellyn, Glendale Heights, Glenwood, Homewood, Lansing, Lisle, Lynwood, Matteson, Naperville, Olympia Fields, Park Forest, Richton Park, Riverdale, Sauk Village, South Holland, Steger, Summit, Thornton, Warrenville, Willowbrook, Woodridge

Michelle Brownfield-Nance – Cities: Calumet Park, Carol Stream, Country Club Hills, Countryside, Crestwood, Downers Grove, Harvey, Hazel Crest, Hickory Hills, Homer Glen, Markham, Midlothian, Oak Forest, Orland Hills, Orland Park, Palos Heights, Palos Hills, Palos Park, Posen, Robbins, Tinley Park, West Chicago, Wheaton, Willow Springs, Winfield, Worth

Ramona Espino – Cities: Bensenville, Clarendon Hills, Des Plaines, Elmhurst, Evanston, Glencoe, Glenview, Golf, Hinsdale, Inverness, Itasca, Kenilworth, Lincolnwood, Lombard, Morton Grove, Mt. Prospect, Neenah, Niles, Northbrook, Northfield, Oak Brook, Oak Brook Terrace, Palatine, Prospect Heights, Rolling Meadows, Rosemont, Skokie, South Barrington, Villa Park, Westmont, Wheeling, Wilmette, Winnetka, Wood Dale

Tyrone Sturgis – Zip Codes: 60609, 60613, 60618, 60623, 60624, 60625, 60626, 60627, 60630, 60631, 60632, 60635, 60639, 60640, 60641, 60644, 60645, 60646, 60648, 60650, 60647, 60651, 60653, 60657, 60654, 60656, 60658, 60659, 60660, 60661, 60666, 60668, 60669, 60670, 60673, 60674, 60675, 60676, 60677, 60678, 60680, 60681, 60686, 60689, 60690, 60693, 60694, 60695, 60696

Vickey Jones – Cities: Alsip, Bellwood, Berkeley, Berwyn, Blue Island, Bridgeview, Broadview, Brookfield, Burbank, Chicago Ridge, Cicero, Elmwood Park, Evergreen Park, Forest Park, Franklin Park, Harwood Hts, Hillside, Hines, Hometown, Indian Head Park, Justice, Knoxville, La Grange, La Grange Park, La Grange Highlands, Lyons, Maywood, Melrose Park, Merrionette Park, Norridge, North Riverside, Northlake, Oak Lawn, Oak Park, Park Ridge, River Forest, River Grove, Riverside, Schiller Park, Stone Park, Summit Argo, Westchester, Western Springs

BILLING SERVICES – CHICAGO METRO AREA

LaVella Friley – Zip Codes: 60608, 60615, 60617, 60619, 60620, 60621, 60628, 60629, 60633, 60636, 60637, 60638, 60642, 60643, 60649, 60652, 60655

Fairness in Contracting

In an effort to comply with fairness in contracting legislation and keep our independently contracted providers informed, BCBSIL has designated a column in the *Blue Review* to notify you of any significant changes to the physician fee schedules. Be sure to review this area each month.

Effective Dec. 1, 2012, the following code ranges will be updated:
A9576-A9585, A9604, J0000-J9999, P9041-P9048, Q0138-Q0181, Q0515, Q2009-Q2027, Q2043, Q3025-Q3026, Q4074-Q4130, Q9951-Q9968, S0012-S0191. Please note that not all codes in these ranges will be updated.

The information above is not intended to be an exhaustive listing of all the changes. Annual and quarterly fee schedule updates can also be requested by using the Fee Schedule Request Form. Specific code changes that are listed above can also be obtained by downloading the Fee Schedule Request Form and specifically requesting the updates on the codes listed in the *Blue Review*. The form is available in the Education and Reference Center/Forms section of our Provider website at bcbsil.com/provider.



Members Must Use Pharmacy Benefit for Self-administered Drugs



For those medications that are approved by the U.S. Food and Drug Administration (FDA) for self-administration, BCBSIL members are required to use their pharmacy benefit and acquire the medication through a pharmacy benefit provider. Self-administered drugs can include oral, topical and injectable products. For your patients to receive benefit coverage, the covered self-administered drugs must not be dispensed through the physician's office or a Home Infusion Therapy (HIT) Ancillary provider (where the HIT Ancillary provider is shipping drugs, including Factor, to a member's home for self-administration).

Effective Jan. 1, 2013, BCBSIL will implement a system edit that will deny services submitted on **professional electronic (ANSI 837P) and paper (CMS-1500) claims** for drugs that are FDA-approved for self-administration and that are covered under the member's prescription drug benefit. Denied service lines on the claim will receive the following message: "Self-administered drugs submitted by a medical professional provider are not within the member's medical benefits. These charges must be billed and submitted by a pharmacy provider."

To help you determine the correct path for medication fulfillment and ensure that the correct benefit is applied, a Specialty Pharmacy Program Drug List will be available in the Pharmacy Program/Specialty Pharmacy section of our website at bcbsil.com/provider. This list will identify those drugs that are approved for self-administration and therefore covered under the patient's pharmacy benefit.

As a reminder, Prime Specialty Pharmacy is the preferred specialty pharmacy for most BCBSIL members. Please check the member's ID card to confirm the member's pharmacy provider. With an extensive inventory of specialty medications in stock and pharmacists available by phone 24/7, Prime Specialty Pharmacy also provides alerts for patient non-adherence issues, coordination of medication refills and other support services. To obtain specialty medications through Prime Specialty Pharmacy, follow these steps:

1. Collect Patient and Insurance Information

Use the Specialty Drug Request fax form or your own prescription form, along with your office's fax cover sheet. The Specialty Drug Request fax form is available in the Pharmacy Program/Specialty Pharmacy section of our website at bcbsil.com/provider. Be sure to include the physician's signature and any clinical data that may support the approval process.

2. Fax Signed Forms to 877-828-3939

Prime Specialty Pharmacy's team of pharmacists and benefit specialists will handle the details, from checking eligibility to coordinating delivery.

For more information, visit the Pharmacy Program/Specialty Pharmacy section of our website at bcbsil.com/provider.

Pharmacy benefits and limits are subject to the terms set forth in the member's certificate of coverage which may vary from the limits set forth above. The listing of any particular drug or classification of drugs is not a guarantee of benefits. Members should refer to their certificate of coverage for more details, including benefits, limitations and exclusions.

Prime Therapeutics Specialty Pharmacy LLC (Prime Specialty Pharmacy) is a wholly owned subsidiary of Prime Therapeutics LLC, a pharmacy benefit management company. BCBSIL contracts with Prime Therapeutics to provide pharmacy benefit management, prescription home delivery and specialty pharmacy services. BCBSIL, as well as several other independent Blue Cross and Blue Shield Plans, has an ownership interest in Prime Therapeutics.

Provider Learning Opportunities



BCBSIL WEBINARS

Below is a list of complimentary training sessions sponsored by BCBSIL. For details and online registration, visit the Workshops/Webinars page in the Education and Reference Center of our website at bcsil.com/provider.

WEBINARS

Electronic Refund Management (eRM)	Nov. 7, 2012	<u>All sessions:</u> 2 to 3 p.m.
	Nov. 14, 2012	
	Nov. 21, 2012	
	Nov. 28, 2012	
ICD-10 <i>This continuing webinar series will offer answers to frequently asked questions with an emphasis on next stages in planning.</i>	Dec. 11, 2012	10 to 11:30 a.m.
	Dec. 12, 2012	11 a.m. to 12:30 p.m.
	Dec. 13, 2012	1 to 2:30 p.m.
	Dec. 18, 2012	1 to 2:30 p.m.
	Dec. 19, 2012	10 to 11:30 a.m.

AVAILITY® WEBINARS

Availity also offers free webinars for their registered users. For a current listing of webinar topics, dates and times, registered Availity users may log on to the secure Availity provider portal—the Live Webinar Schedule is located under the **Free Training** tab. Not yet registered with Availity? Visit their website at availity.com for details; or call Availity Client Services at 800-AVAILITY (282-4548) for assistance.

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BCBSIL makes no endorsement, representations or warranties regarding any products or services offered by Availity. The vendor is solely responsible for the products or services offered by them. If you have any questions regarding the services offered here, you should contact the vendor directly.

Flu Season Reminders

BCBSIL reminds you to encourage your patients to get their annual flu shot. In the U.S., the flu season can start as early as October and last as late as May.

The Centers for Disease Control and Prevention (CDC) recommends that everyone 6 months of age and older receive an annual influenza vaccination. The CDC specifically encourages vaccination for all health care providers, as well as individuals at higher risk for influenza complications. Additional information and resources on influenza are available on the CDC website at cdc.gov/flu.

Please note that, while many BCBSIL members' health benefit plans include influenza vaccination coverage with no member cost sharing, there are some exceptions. It is important to check eligibility and benefits information to confirm details regarding copays, coinsurance and deductibles before administering the influenza vaccine to BCBSIL members.

Checking eligibility and/or benefit information is not a guarantee of payment. Benefits will be determined once a claim is received and will be based upon, among other things, the member's eligibility and the terms of the member's certificate of coverage applicable on the date services were rendered. If you have any questions, please call the number on the back of the member's ID card.



Be Prepared: Attend an ICD-10 Webinar

The ICD-10 conversion is quickly approaching, and we can help you get the information you need to prepare for successful implementation. Our ICD-10 Webinar series continues in December 2012, with a focus on the steps required for transitioning your practice or organization. Agenda topics include:

- What you should be doing now
- Your readiness reality check
- Internal and external impact assessment
- Education assessment
- Baseline budget formulation
- Business process changes
- Internal and external testing and validation

For ICD-10 Webinar dates and times, refer to the *Provider Learning Opportunities* on page 7. Are there additional topics you would like us to cover? Email your ideas to us at icd@bcbsil.com.

We also encourage you to complete our ICD-10 Provider Readiness Assessment Survey, which is available in the Standards and Requirements/ICD-10 section of our website at bcbsil.com/provider.

Blue Review is a monthly newsletter published for Institutional and Professional Providers contracting with Blue Cross and Blue Shield of Illinois. We encourage you to share the content of this newsletter with your staff. *Blue Review* is located on our website at bcbsil.com/provider.

The editors and staff of *Blue Review* welcome letters to the editor. Address letters to:

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