

PHYSICIAN *news*

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www.bcbsok.com

Technology project to revolutionize claims, customer service processes

Blue Cross and Blue Shield of Oklahoma is introducing technology intended to improve service for both providers and members.

"This technology promises to make paper and microfilm as outdated as typewriters and carbon paper," said Wayne Wallace, vice president, health industry relations. "Information requests that used to take several days have an answer almost instantly."

Full implementation — in three phases — is expected to be completed in 2004.

Phase One — The first phase, which began this year, involves data capture and storing electronic images of documents to make them electronically accessible for authorized associates. This technology allows instantaneous retrieval of information and simultaneous viewing of information by more than one associate. This will speed responses to customer and provider inquiries. The storage and retrieval of data will have strict security protocols.

Phase Two — The second phase enhances current optical character recognition (OCR) technology that reads characters on a page and converts them to data. This will improve claims processing efficiency.

Phase Three — The final phase includes workflow capability, which directs work to associates through the imaging system. This

Claims submission policy revised to accommodate new technology

Effective Jan. 1, 2003, the claims submission process for providers will be changed to accommodate new technology adopted.

"This new technology will improve claims processing and efficiency, resulting in quicker reimbursements for our contracting providers," said Julie Sloan, manager, health industry relations. Some of the changes include:

- Claims must be submitted on the **RED** HCFA or UB claim form. Claims not submitted on the red form will be returned to the provider.
- Faxed claims forms can no longer be accepted.
- Claims with non-identifiable provider or member ID numbers will be returned to the physician's office.

Workshops concerning the new policy will be scheduled and invitations will be mailed to provider offices. Contact a provider relations representative with questions or concerns.

gets the right information to the right person at the right time and eliminates paper throughout the operation.

Standards help ensure member access to health care

To help ensure Blue Cross and Blue Shield of Oklahoma and BlueLincs HMO members have access to contracting physicians, standards were established and are updated yearly.

Routine health evaluation — appointments available within 30 working days.

Sick non-urgent appointments — appointments available within five working days. After hours, physicians available 24 hours per day with physicians to return patients' phone calls within one hour.

Urgent appointments — appointments available within 24 hours, or the patient is referred to

urgent care services.

Emergency situation — members seek care from the nearest facility and call PCP within 48 hours of incident to arrange for follow-up care.

Chronic condition follow-up — appointment available within 30 days.

Initial specialist care referral — appointment available within 14 working days.

Urgent specialist care referral — appointment available within 24 hours.

Clinic waiting time — no longer than one hour. Wait time is measured from the start of the scheduled appointment.

Submit claims for Kellogg members through BlueCard®

Claims for members of the Kellogg-Keebler Company should be submitted to Blue Cross and Blue Shield of Oklahoma for processing through the BlueCard® program.

Kellogg members' home plan is Blue Cross and Blue Shield of Michigan, and claims will be processed through the Oklahoma Plan as any other BlueCard claim. For benefit information,

call the customer service phone number listed on the member ID card, or call *BlueCard Eligibility* at 1-800-676-BLUE (2583).

Providers can recognize Kellogg members by the alpha prefixes KLG, KLM and KLN. Including the alpha prefix from the member's ID card will speed claims processing and reimbursements.

Drug Formulary Update

The prescription drug formulary is updated quarterly by the Pharmacy and Therapeutics Committee, and is for members with a prescription drug card that includes copayments. Prescribing medications listed on Tier I or Tier II will give the member the lowest copayment and out-of-pocket expense.

For the most current formulary listing, visit www.bcbsok.com or call the customer service phone number listed on the member's ID card.

Drugs assigned to Tier I (generic)

Metaproterenol
Ipratropium solution
Cromolyn sodium solution
Flunisolide
Erythromycin
Neomycin/polynyxin B/dexamethazone
Clotrimazole

Ketoconazole
Diflorasone

Drugs assigned/moved to Tier II (preferred brand)

Entocort EC
Tobradex
Floxin Otic

Drugs assigned/moved to Tier III

Accolate
Vioxx
Celebrex
Vanceril DS
Isopto Carbachol
Phospholine Iodide
Daranide
Natacyn
Coly-Mycin S
Pediatic
Psorcon

Phone Numbers

Membership and Benefit Eligibility Phone Numbers

To verify membership and benefit eligibility, call the Customer Service number listed on the member's ID card. Dialing the phone number on the card will help direct you to the right person the first time. The customer service phone numbers are listed here in case you do not have access to the member's ID card. You also may visit the secure provider Web site (password required) at www.bcbsok.com.

Precertification and requests for out-of-network referrals

- **Blue Cross and Blue Shield of Oklahoma and Custom Group Services**

Statewide	1-800-672-2378
Tulsa	(918) 560-3595
Oklahoma City	(405) 841-9585
FAX	(918) 560-3380

- **BlueLincs HMO**

Statewide	1-800-580-4454
Tulsa	(918) 561-9981
Oklahoma City	(405) 841-9610

In-Network Referral Authorization

- **Blue Cross and Blue Shield of Oklahoma**

Statewide	1-800-241-2583
FAX	(918) 560-3380

- **Custom Group Services**

Statewide	1-800-672-2567
Tulsa	(918) 586-7715
Fax	(918) 743-9063

- **BlueLincs HMO**

Statewide	1-800-533-0401
Tulsa	(918) 586-4911

Blue Cross and Blue Shield of Oklahoma Health Industry Relations

- Tulsa (918) 560-3566
- Oklahoma City (405) 841-9735
- Statewide 1-800-722-3730

For this member call

- **Blue Cross and Blue Shield of Oklahoma**

Statewide	1-800-722-3730
Oklahoma City	(405) 841-9735

- **Plan65**

Membership and Benefits Eligibility

1-800-722-3959, Option #2

Claim status

Statewide	1-800-722-3959
Tulsa	(918) 560-3399
Oklahoma City	(405) 841-9799

- **General Motors (GM)** 1-800-722-4559

- **Oklahoma University (OU)** 1-800-722-3292

- **Williams Companies** 1-800-722-4575

- **Helmerich & Payne** 1-888-780-7875

- **Federal Employee Program**

Statewide	1-800-722-3130
Tulsa	(918) 560-2004

- **BlueCard® Program** (Out-of-area members)
Membership and eligibility

1-800-676-BLUE (2583)

Claim status 1-800-722-3730, Option #1

- **Custom Group Services**

Statewide	1-800-672-2567
Tulsa	(918) 586-7700

- **BlueLincs HMO**

Statewide	1-800-722-5675
Tulsa	(918) 561-9933
Oklahoma City	(405) 841-9777

Hypertension study shows opportunities to enhance management

Results of a recent Blue Cross and Blue Shield of Oklahoma hypertension study of members found several opportunities present for enhancing member health.

Some of the key results include:

- Blood pressure control at less than 140/90 was accomplished for only 43 percent of the membership surveyed.
- For hypertensive members with diabetes, control at less than 135/85 was 22 percent.
- Despite this lack of control, 64 percent of the membership was taking no medication or only one medication.
- Less than optimal utilization of Beta-blockers

was noted for members with a history of myocardial infarction, and of an ACE inhibitor for those members with diabetes or congestive heart failure.

A tear sheet with the results of the study, including best practices, as well as a brief outline of JNC VI recommendations is now available at no charge to participating providers. The guideline also contains an area where medications can be noted for the hypertensive patient.

To request the pads of these chart-ready tear sheets free of charge, contact Judy Hancock at (918) 631-6608, or by e-mail at jhancock@bcbsok.com.

Let us know what you think

We'd like to hear your opinions about *Physician News* and Blue Cross and Blue Shield of Oklahoma. Let us know what's on your mind. We'll do our best to address your concerns and opinions.

Send your comments or personal experiences with Blue Cross and Blue Shield of Oklahoma to:

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Blue Cross and Blue Shield of Oklahoma
PO Box 3283
Tulsa, OK 74102-3283

Name (optional)

Address City State Zip

Comments (use additional sheet if necessary)

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