

Providers' assistance needed during annual HEDIS reporting period

The annual Healthcare Effectiveness Data and Information Set® reporting period is just around the corner, and we are requesting providers' cooperation with our efforts to collect medical record data for our members whom you have treated.

Blue Cross Complete of Michigan has contracted Reveleer to assist us with the medical record retrieval for the annual medical record review process.

Reveleer is required to comply with Health Insurance Portability and Accountability Act Privacy requirements throughout the retrieval process and is trained in medical record retrieval for HEDIS, Centers for Medicare & Medicaid Services and state quality reporting programs. Disclosure and use of the medical records, and the collection of medical records for this purpose, are considered to be treatment, payment or health care operations under HIPAA regulations (45 C.F.R.164.502(a)(1)(ii)).

We remind you that under the terms of your provider agreement, records are to be provided at no charge. A representative from Reveleer will contact your office soon to schedule the record retrieval.

If you have any questions that Reveleer can't address, call Jennifer Baker, Lead HEDIS Data Reviewer, at jbaker@amerihealthcaritas.com

Recuperative Care benefits available

Recuperative Care providers will be reimbursed for eligible services when provided to Medicaid beneficiaries ages 18 and older, effective for dates of services on or after Sept. 1, 2024.

The Michigan Department of Health and Human Services released Bulletin MMP 24-27* on July 31, 2024, which outlines coverage for RC benefits. This coverage is available to Medicaid-enrolled homeless individuals aged 18 and older, who are enrolled in a fee-for-service Medicaid plan, Healthy Michigan, or Managed Care program.

RC is a transitional program for Medicaid beneficiaries meeting eligibility requirements who are experiencing homelessness and discharging from an inpatient hospital admission. These beneficiaries are too ill or frail to return to their living environment but are not eligible to continue hospital-level care, skilled nursing care, or other inpatient Medicaid services.

RC is a short-term program that allows these beneficiaries to recover post-hospitalization, receive case management

services, access medical care or other Medicaid services, and receive supportive services. RC coverage can not exceed 90 days per hospital discharge, and prior authorization is required through the MDHHS Program Review Division before the start of services.

For full details on policy MMP 24-27, including provider requirements, enrollment, prior authorization, and beneficiary eligibility, review the Medicaid Provider Manual* at michigan.gov.* If you have any questions, contact your Blue Cross Complete provider account executive or Provider Inquiry at 1-888-312-5713.

Vaccine for Children Program: Your participation in essential

In an ongoing effort to protect children from preventable diseases, Blue Cross Complete and the Michigan Department of Health and Human Service is calling on health care providers across the state to participate in the Vaccine for Children Program.

The VFC Program, which is federally funded, provides vaccines at no cost to children who might not otherwise be vaccinated because their parents or guardians may not be able to afford the vaccines.

Protecting children from diseases that can be prevented by vaccination is a primary goal of Blue Cross Complete and MDHHS. Your active participation in the VFC Program is vital to increasing immunization rates and helping to ensure all children are protected against vaccine-preventable diseases.

For more detailed information on what the VFC Program involves, including a list of the vaccines that are covered, providers may access the MDHHS VFC Resource Book at michigan.gov/vfc.* Additional information and resources about the VFC Program are also available at mibluccrosscomplete.com, under the Clinical Resources tab.

Do you know your Blue Cross Complete Account Executive?

Blue Cross Complete account executives are dedicated professionals who serve as primary points of contact for providers.

They bridge the gap between health care providers and Blue Cross Complete, ensuring that communication is smooth, challenges are addressed promptly, and providers have the resources they need to deliver exceptional care to members.

Check for updates, and locate the account executive for your area at mibluccrosscomplete.com. If you have any questions, contact your Blue Cross Complete provider account executive or Provider Inquiry at 1-888-312-5713.

*Our website is mibluccrosscomplete.com. While website addresses for other organizations are provided for reference, Blue Cross Complete doesn't control these sites and isn't responsible for their content.