



BlueCross BlueShield of Texas

# Texas Medicaid Provider Orientation

Blue Cross and Blue Shield of Texas  
STAR, CHIP, and STAR Kids



SKSCP-9029-0422

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Blue Cross and Blue Shield of Texas, a Division of Health Care Service Corporation,  
a Mutual Legal Reserve Company, an Independent Licensee of the Blue Cross and Blue Shield Association

## Content Overview



BlueCross BlueShield of Texas

- What is STAR, CHIP, and STAR Kids
- Member Benefits and Services
- Texas Health Steps (THSteps)
- Healthy Texas Women
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- Children of Migrant Farmers
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- Member Enrollment and Eligibility
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- Submitting Claims & Appeals/Reconsiderations
- Customer Services
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BlueCross BlueShield of Texas

## Purpose

**To do everything in our power to stand with our members in sickness and health. We strive to develop relationships with our members, providers and the communities that we serve in order to better our STAR, CHIP, and STAR Kids member's health.**





BlueCross BlueShield of Texas

# STAR, CHIP, and STAR Kids Program Overview.





## STAR

*(State of Texas Access Reform)* is the Medicaid Managed Care Program of Texas.



## CHIP

*(Children's Health Insurance Program)* is the health insurance option for children.



## STAR Kids

is the Medicaid managed care program that serves youth and children ages 20 and younger who receive disability related Medicaid.

### **Important Medicaid Programs:**

Texas Health Steps often referred to (THSteps) is healthcare for children birth through age 20 who have Medicaid. THSteps gives your child free medical checkups starting at birth, and free dental checkups starting at 6 months of age. Another program is Healthy Texas Women a program dedicated to offering women's health and family planning at no cost to eligible women in Texas.

# STAR Member Benefits and Services



The STAR program is for people who qualify for Medicaid and who are either pregnant, have limited income, are newborns or receive cash assistance (Temporary Assistance for Needy Families or TANF).

- Emergency Ambulance
- Annual Adult Wellness Exams
- Audiology, Chiropractic & Podiatry
- DME/Orthotics and Prosthetics\*
- Emergency Services
- Family Planning
- Home Health\*
- Inpatient and Outpatient Hospital Services\*
- Lab – X-Rays \*
- OB/GYN and Pregnancy and Maternity Care
- Applied Behavioral Analysis (ABA)\*
- Physical Therapy, Occupational Therapy, and Speech Therapy\*
- Prescription Drugs\*
- Rehabilitation Services\*
- Texas Health Steps (EPSDT- Early and Periodic Screening, Diagnosis and Treatment Program Services)
- Transplant Services\*
- Value Added Services \*\*

**STAR Members do not have cost-sharing or co-pays for services.**

*\*Some Benefits need Prior Authorization*

*\*\*Limitations on Value Added Services must be clearly stated in member materials.*

For more information regarding STAR Member Benefits including Value Added Services, Please refer to your [BCBSTX Provider Manual](#).

# CHIP Member Benefits and Services



The CHIP and CHIP Perinatal program is available to children ages 18 and younger and pregnant women who do not qualify for Medicaid.

- Inpatient Acute and Rehabilitation Hospital Services\*
- Substance Abuse Treatment Services\*
- Outpatient and Ambulatory Health Services
- Rehabilitation Services\*
- Hospice Care\*
- Physician/Physician Extender Professional Services PCP's and Specialists
- Emergency Services, Hospitals, Physicians and Ambulances
- Pregnancy and Family Planning Services
- Physical Therapy, Occupational Therapy and Speech Therapy\*
- Audiology, Chiropractic & Podiatry,
- Transplants\*
- DME Supplies\*
- Vision
- Home Health
- Chiropractic
- Inpatient and Outpatient Mental Health Services\*
- Value Added Services \*\*
- Lab X-Rays\*

***Per HHS, Member copays depends on their income and can be up to \$35***

[www.hhs.texas.gov/services/health/medicaid-chip/medicaid-chip-members/chip](http://www.hhs.texas.gov/services/health/medicaid-chip/medicaid-chip-members/chip)

***\*Some Benefits need Prior Authorization.***

***\*\*Limitations on Value Added Services must be clearly stated in member materials.***

For more information regarding CHIP Member Benefits including Value Added Services, Please refer to your [BCBSTX Provider Manual](#).

# STAR Kids Member Benefits and Services



The STAR Kids program provides Medicaid services for children and youth ages 20 and younger with disabilities.

STAR Kids Members Benefits Modifications. Include all the traditional benefits offered in the STAR Program.

However, the STAR Kids program offers additional benefits in the form of Long-Term Services and Supports (LTSS) which includes but not limited to services such as:

- Adaptive Aids
- Community First Choice Services
- Personal Care Services
- Minor Home Modifications
- New benefit effective 2/1/2022: Applied Behavioral Analysis (ABA)\*

**Star Kids Members do not have cost-sharing or co-pays for services.**

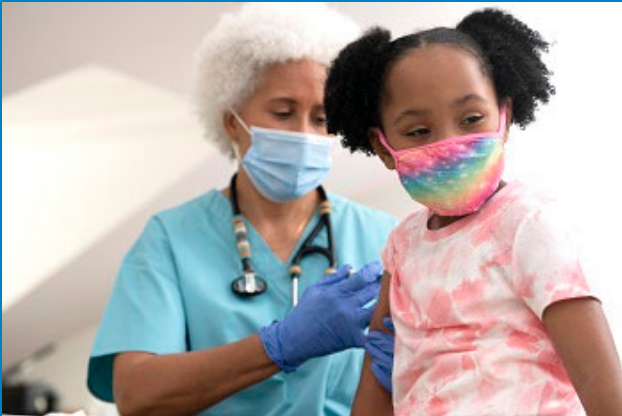
***\*Some Benefits need Prior Authorization***

***Limitations on Value Added Services must be clearly stated in member materials.***

For more information regarding STAR Kids Member Benefits including Value Added Services, Please refer to your [BCBSTX Provider Manual](#).



# Scope of Texas Health Steps Services (THSteps)



Texas Health Steps provides preventive health-care services to children and teens who are 20 years old or younger.

Texas Health Steps (THSteps) helps members with:

- Preventive care medical checkups and services
- Dental checkups and treatment services
- Comprehensive Care Program (CCP)
- Laboratory services
- Immunization services
- Electronic Visit Verification (EVV)

Providers can enroll to provide preventive care to kids and teens, by enrolling as a Texas Health Steps provider through [Provider Enrollment on the Portal \(PEP\)](#)

For additional information for THSteps:  
<http://www.tmhp.com/programs/thsteps>

# Healthy Texas Women



Healthy Texas Women is a program that provides primary healthcare services, including family planning services and health screenings, to eligible women under 1 Tex. Admin. Code Chapter 382, Subchapter A.

**Healthy Texas Women provides a wide variety of women's health and core family planning services,** eligible low-income women may receive the following services free with this program.

- Pregnancy testing
- Pelvic examinations
- Sexually transmitted infection services
- Breast and cervical cancer screenings
- Clinical breast examination
- Mammograms
- Screening and treatment for cholesterol, diabetes and high blood pressure
- HIV screening
- Long-acting reversible contraceptives
- Oral contraceptive pills
- Permanent sterilization
- Other contraceptive methods such as condoms, diaphragm, vaginal spermicide, and injections
- Screening and treatment for postpartum depression

**For additional information such as: Who can Apply; How to apply; Additional Questions and Answers, please visit:**  
<https://www.healthytexaswomen.org/healthcare-programs/healthy-texas-women>

# Healthy Texas Women Plus



Texas Health and Human Services (HHSC) launched a new postpartum services package for HTW clients call **Healthy Texas Women Plus**. Benefits available through HTW Plus focus on treating health conditions that contribute to maternal morbidity and mortality, including postpartum depression, cardiovascular conditions, and substance use disorders.

If a woman has been pregnant within the last 12 months? This program was developed and created for a postpartum care package through the Healthy Texas Women Plus program.

Women must be already enrolled in the Healthy Texas Women program to participate.

For additional information, please visit:

<https://www.healthytexaswomen.org/healthcare-programs/healthy-texas-women/htw-benefits>

## **What services are covered?**

- Some of the postpartum depression and other mental health conditions that are treated include: individual, family and group psychotherapy services and peer specialist services.
- Heart health services includes blood pressure monitoring, image studies and heart medications.
- Substance use disorder, including drug, alcohol and tobacco misuse, services include screenings, brief interventions, treatment referrals, outpatient substance use counseling, smoking cessation, medication –assisted treatment and peer specialist services.

Note: Only the services listed above are paid by this program.

# Children of Migrant Farmworkers



Migrant farmworker is defined as “a migratory agricultural worker, whose principal employment is in agriculture on a seasonal basis, who has been so employed within the last 24 months and who establishes for the purposes of such employment a temporary abode.”

- Some of the barriers for Farmworkers to overcome: High mobility, language and cultural barriers, inaccessibility to health care service and lack of health insurance coverage.
- Special attention should be paid to **educating** traveling farmworkers families on the importance of their children receiving timely or accelerated Texas Health Steps (THSteps) medical and dental checkups prior to the family traveling for work.
- Blue Cross and Blue Shield of Texas (BCBSTX) relies on you to identify these patients and determine if there is a need to accelerate any THSteps medical or dental checkups.

THSteps checkups are made up of six primary components.

1. Comprehensive health and developmental history
2. Comprehensive unclothed physical examination
3. Appropriate immunizations
4. Appropriate laboratory test
5. Health education
6. Dental referral

If you have questions about identifying children of Migrant Farmworkers or Texas Health Steps, please call Provider Network Representative: **1-855-212-1615.**

# Cultural Competency



Cultural Competency is the ability of individuals and systems to provide services effectively to people of various cultures, races, ethnic background and religions in a manner that recognize values, affirms and respects the worth of the individual and protects and preserves dignity.

The Health and Human Services Commission requires all contracting health plans to develop and maintain cultural competency plans and make them available to providers.

BCBSTX has adopted all 15 **Culturally and Linguistically Appropriate Services (CLAS)** Standards to ensure all members who enter the health care system receive equal, high quality, effective treatment.

As our contracted health care provider, our expectation is for you to continually improve sensitivities and maintain positive attitudes toward serving diverse cultures. This can help you provide more effective care and services for all people by considering each person's values, life conditions and linguistic needs.

**The purpose of the 15 action steps is threefold:**

- **Advance health equity,**
- **Improve quality of care, and**
- **Help eliminate health care disparities to achieve the ultimate goal of improved health outcomes.**

**The link to CLAS 15 action steps:**

<https://www.thinkculturalhealth.hhs.gov/clas/standards>

**Please register for the Culturally Competent Health Care Provider Training:** <https://www.bcbstx.com/provider/medicaid/training.html>

# Applied Behavioral Analysis (ABA)



## New Program

**Effective February 1, 2022** autism services are a benefit of the Texas Health Steps-Comprehensive Care Program (THSteps-CCP) for Medicaid clients who are 20 years of age or younger, and who meet criteria outlined in the [Texas Medicaid Autism Services Policy](#)

If you believe your patient may have a diagnosis of Autism Spectrum Disorder (ASD), and they would benefit from treatment with Applied Behavioral Analysis (ABA) and other autism services, the diagnosis must first be confirmed by a specific list of providers.

A diagnosis of ASD requires a comprehensive diagnostic evaluation (CDE) performed by one of the specific provider types. To qualify for ABA services, the CDE must be conducted no earlier than three years prior to the initiation of ABA therapy, and the CDE must recommend ABA services as part of any treatment recommendations.

Texas Medicaid also offers an array of medically necessary services to support individualized treatment plans for children and youth up to 20 years of age with ASD.

**Disclaimer: Providers of the Interdisciplinary team who participate in the interdisciplinary meeting can submit a claim for that meeting and attach the attendance form and the claim for payment.**

**For full details of the Texas Medicaid Autism Services Policy visit [TMHP website](#).**

# Vendor Services

## Behavioral Health Magellan Healthcare

Medicaid STAR /CHIP Phone  
Number:

**1-800-327-7390**

STAR Kids Members

Phone Number:

**1-800-424-0324**

**Website:**

[www.magellanhealth.com](http://www.magellanhealth.com)

## Dental Services:

### DentaQuest

Phone Number:

**1-800-516-0165**

**Website:**

[www.dentaquest.com](http://www.dentaquest.com)

### Managed Care of North America Dental (MCNA)

Phone Number:

**1-800-494-6262**

**Website:**

[www.mcna.net](http://www.mcna.net)

## Vision Service:

### Davis Vision

Phone Number:

**1-800-773-2847**

**Website:**

[www.davisvision.com/eye-care-professionals/](http://www.davisvision.com/eye-care-professionals/)

## Prime Pharmacy: Services Therapeutics

STAR Phone Number:

**1-855-457-0405**

CHIP Phone Number:

**1-855-457-0403**

STAR Kids Phone  
Numbers:

**1-855-457-0757**

(Travis service area)

**1-855-457-0758**

(MRSA Central service area)

**Website:**

[www.myprime.com](http://www.myprime.com)

# Value-Added Services (VAS) – STAR

BCBSTX has many VAS to help members stay healthy. These services are offered at no cost to members. VAS include:

- Extra Help Getting a Ride: Free rides to BCBSTX member events and meetings, VAS services and approved health classes.
- Texas Health Steps Gift Card Incentive
- Adolescent Checkup Gift Card Incentive
- Enhanced Eyewear
- Sports and Camp Physicals
- Prenatal Care Incentive with Infant Car Seat or Pack and Play
- Prenatal Class with Incentive Diaper Bag
- Prenatal Visit Gift Card Incentive
- Postpartum Visit Gift Card Incentive
- Breastfeeding education through our Special Beginnings<sup>®</sup> Program
- Fresh and Healthy Produce Delivery for Pregnant Members
- In-Home delivery meal services after a Qualifying Hospitalization
- Dental Services for Adult Members
- Online Behavioral Health (BH) Resources
- Incentive Gift Card for Getting Follow-up Care after a BH inpatient Discharge
- Access to findhelp, formerly Aunt Bertha, and Wellness Resources
- Blue365<sup>®</sup> Discount Pharmacy Program
- Boys and Girls Club Membership

VAS may have restrictions and limitations. Limitations on these services are explained in the [VAS brochure](#)



# Value-Added Services (VAS) – CHIP or CHIP Perinate

BCBSTX has many VAS to help members stay healthy. These services are offered at no cost to members. VAS include:

- Free rides to non-emergency doctor visits, therapy, pharmacy, WIC visits and classes
- Well-Child Checkup Incentive Gift Card Incentive
- Adolescent Checkup Gift Card Incentive
- Enhanced Eyewear
- Sports and Camp Physicals
- Boys and Girls Club Membership
- New Mom Welcome Home Kit
- Prenatal Care Incentive Option with Infant Car Seat or Pack and Play
- Prenatal Class with Incentive Diaper Bag
- Breastfeeding Education through our Special Beginnings® Program
- Breastfeeding Support Kit
- Fresh and Healthy Food Support for Pregnant Members
- In-Home Meal Delivery Services after a Qualifying Hospitalization
- Dental Services for Adult Members
- Online Behavioral Health (BH) Resources
- Incentive Gift Card for Getting Follow-up Care after a BH Inpatient Discharge
- Access to findhelp, formerly Aunt Bertha, Health and Wellness Resources
- Blue365® Discount Pharmacy Program

VAS may have restrictions and limitations. Limitations on these services are explained in the [VAS brochure](#)

# Value-Added Services (VAS) – STAR Kids

BCBSTX has many VAS to help members stay healthy. These services are offered at no cost to members. VAS include:

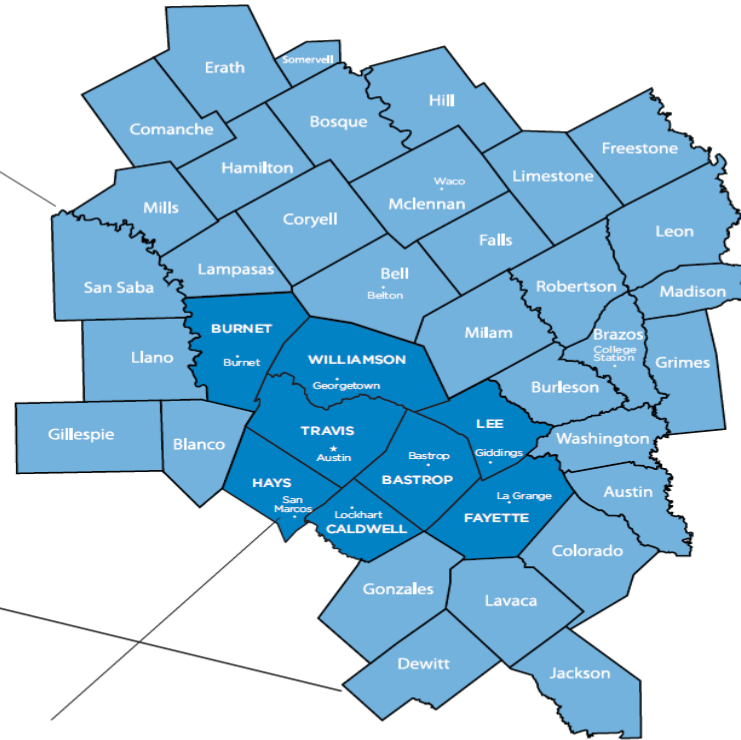
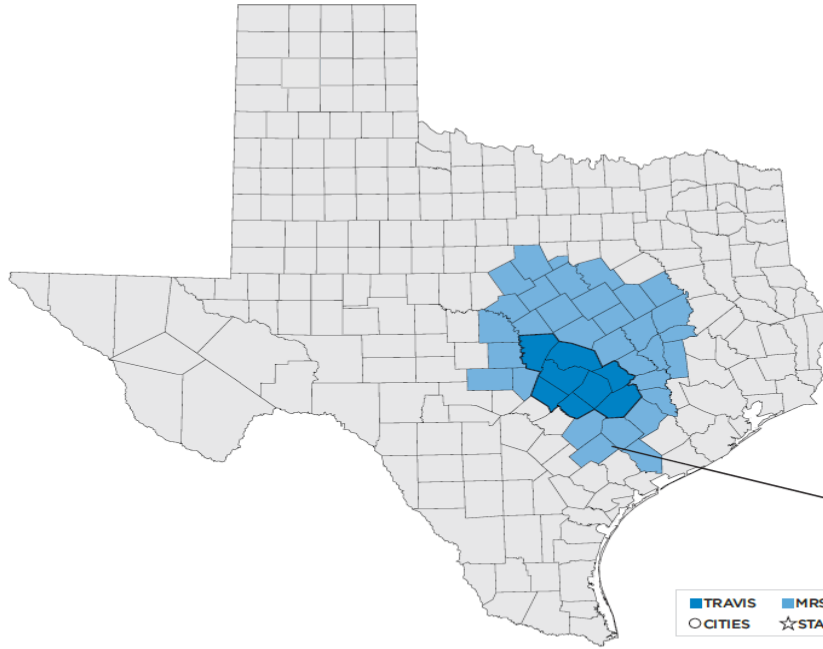
- Extra Help Getting a Ride: Free rides to BCBSTX member events and meetings, VAS services and approved health classes.
- Extra Help for Parents: Respite care for parents/LARs.
- Texas Health Steps Gift Card Incentive
- Adolescent Checkup Gift Card Incentive
- Enhanced Eyewear
- Sports and Camp Physicals
- Reimbursement for Summer Camp Enrollment Fees
- Prenatal Care Incentive with Infant Car Seat or Pack and Play
- Prenatal Class with Incentive Diaper Bag
- Prenatal Visit Gift Card Incentive
- Postpartum Visit Gift Card Incentive
- Breastfeeding education through our Special Beginnings<sup>®</sup> Program
- Fresh and Healthy Produce Delivery for Pregnant Members
- In-Home delivery meal services after a Qualifying Hospitalization
- Hippotherapy or Therapeutic Riding Services
- Incentive Gift Card for attending Member Resource Meetings
- Online Behavioral Health (BH) Resources
- Incentive Gift Card for Getting Follow-up Care after a BH inpatient Discharge
- Access to findhelp, formerly Aunt Bertha, and Wellness Resources
- Blue365<sup>®</sup> Discount Pharmacy Program

VAS may have restrictions and limitations. Limitations on these services are explained in the [VAS brochure](#)

# Where We Serve

## Service Area: **MRSA CENTRAL TEXAS**

COUNTIES:  
 BELL, BLANCO, BOSQUE, BRAZOS, BURLERSON, COLORADO, COMANCHE, CORYELL, DEWITT, ERATH, FALLS, FREESTONE,  
 GILLESPIE, GONZALES, GRIMES, HAMILTON, HILL, JACKSON, LAMPASAS, LAVACA, LEON, LIMESTONE, LLANO, MADISON,  
 MCLENNAN, MILAM, MILLS, ROBERTSON, SAN SABA, SOMERVELL, WASHINGTON



■ TRAVIS ■ MRSA CENTRAL TEXAS  
 ○ CITIES ☆ STATE CAPITAL

## Service Area: **TRAVIS**

COUNTIES:  
 BASTROP, BURNETT, CALDWELL, FAYETTE, HAYS, LEE, TRAVIS, WILLIAMSON

## STAR and CHIP

### Service Area Travis Counties:

Bastrop, Burnett, Caldwell, Fayette, Hays, Lee, Travis and Williamson

## STAR Kids

### Service Area Travis Counties:

Bastrop, Burnett, Caldwell, Fayette, Hays, Lee, Travis and Williamson

### Service Area MRSA Central Texas Counties:

Bell, Blanco, Bosque, Brazos, Burleson, Colorado, Comanche, Coryell, Dewitt, Erath, Falls, Freestone, Gillespie, Gonzales, Grimes, Hamilton, Hill, Jackson, Lampasas, Lavaca, Leon, Limestone, Llano, Madison, McLennan, Milam, Mills, Robertson, San Saba, Somervell and Washington



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# How to Verify Member Eligibility?



# Texas Health and Human Services (HHSC)



The Texas Health and Human Services Commission (HHSC) delegates the responsibility of educating eligible STAR, CHIP, and STAR Kids members about their health plan options to Maximus.

The State will assign STAR and STAR Kids members to a plan if the member/family does not choose a plan.

CHIP and CHIP Perinate eligible members **must enroll** in a CHIP HMO within 90 days. CHIP eligible members do not default into an HMO. If an HMO is not chosen, the CHIP eligible member will become ineligible.

**Note:** *CHIP Perinate newborns are eligible for 12 months of continuous coverage beginning with the month of enrollment.*

# How to Verify Member Eligibility?

Our providers must verify eligibility before each service.

Contact Customer Service for eligibility verification:

STAR/CHIP: 1-877-560-8055

STAR Kids: 1-877-784-6802

Use the State's Automated Inquiry System (AIS) for

STAR and STAR Kids

1-800-925-9126

Utilize online resources:

[www.tmhp.com](http://www.tmhp.com)

[www.availity.com](http://www.availity.com)

CHIP Members receive a card:

- Blue Cross and Blue Shield of Texas member identification card
- They do not receive a State issued Medicaid identification card.

STAR and STAR Kids members will receive two identification cards upon enrollment:

- State issued Medicaid card (Your Texas Medicaid Benefit Card)
- Blue Cross and Blue Shield of Texas Member Identification card

Blue Cross and Blue Shield of Texas identification cards will be re-issued if/when:

- The member changes his/her address
- The member changes his/her PCP
- Upon Request
- At Membership renewal



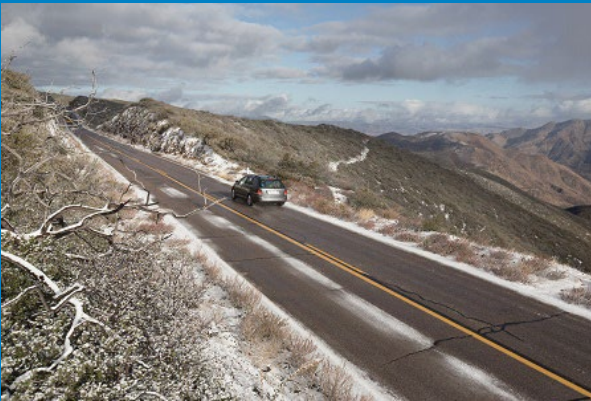
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# How to Submit a Claim?



## Road to get claims paid quickly: Benefits of Electronic Data Interchange (EDI) and Claims Portals

**Timely Filing Limit: 95 calendar days from  
the date of service or per provider  
agreement or contract**



- Convenient expedited claims processing
- Able to confirm, correct errors, and resubmit batch status electronically
- Portals/EDI Vendors
- TMHP Claims Portal
- Availity® Essentials
- HIPAA compliant and meet federal requirements

### Paper Claims Submission

- Paper Claims
- Professional = CMS – 1500
- Institutional =CMS- 1450
- **Paper Claims Address:**
- Blue Cross and Blue Shield of Texas
- PO Box 51422
- Amarillo, TX 79159-1422

### Electronic Claim Submission

- Electronic Data Interchange (EDI)
- Electronic Payor ID: 66001





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# Availity

[www.availity.com](http://www.availity.com)

Claims Submission

Claims Status



# Using Availity® Essentials for Claim Submission and Status



For electronic claim submissions, providers can submit and review claim status through the Availity® Essentials

The Availity® Essentials is HIPAA-compliant method of receiving claim payment and remittance details from BCBSTX.

For more information on how to register with Availity® Essentials, please visit: <https://www.availity.com/Essentials-Portal-Registration>

If you are already a registered user and need additional help navigation the Availity Provider Portal, please visit our Availity Tip Sheet at: <https://www.bcbstx.com/docs/provider/tx/claims/claim-status/claim-status-tool.pdf>

# Texas Health Steps Claims

The Current Procedural Terminology (CPT®) codes are available in the Texas Medicaid Provider Procedure Manual (TMPPM).



Providers, including Rural Health Clinics (RHCs) and Federally Qualified Health Centers (FQHCs) should contact: The appropriate medical or dental managed care plan, or TMHP for patients with fee-for-service coverage.



For more information regarding the Texas Health Steps Program or billing, please visit our provider website:  
<https://www.bcbstx.com/provider/medicaid/education-and-reference/materials>



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# Utilization Management and Prior Authorizations



# Utilization Management

**BCBSTX Utilization Management (UM) Team collaborates with providers to promote and document the appropriate use of health care resources.**

Utilization Management takes a multidisciplinary approach to help provide access to health care services in the setting best suited for the medical and psychosocial needs of the member based on benefit coverage, established criteria and the community standards of care.

Authorization is based on medical necessity and will be contingent upon eligibility and benefits. It is not a guarantee of payment. Benefits may be subject to limitations and/or qualifications with the exception of Texas Health Steps Service for children from birth through 20 years of age. For these services, medical necessity is based on the clinical documentation received by the utilization management department when requesting a prior authorization.

Providers may call Utilization Management toll-free for **STAR and CHIP at 1-877-560-8055 and STAR Kids at 1-877-784-6802** with questions and/or requests, including requests for urgent/expedited prior authorization and urgent concurrent/continued stay review. An on-call nurse will provide assistances for any urgent after hours needs.

Utilization Management attempts to return calls the same day they are received during normal business hours. Calls received after normal business hours will be returned the next business day. All routine requests will be responded to within **24 hours**.

Providers may fax Utilization Management for **STAR and CHIP to 1-855-653-8129 and STAR Kids to 1-866-644-5456** with requests for urgent/expedited and non-urgent prior authorization and concurrent/continued stay review. Faxes are accepted during normal business hours as well as after hours. Faxes received after hours will be processed the **next business day**.

Eligibility verification, benefits, and network information may be available after normal business hours at [www.availity.com](http://www.availity.com).

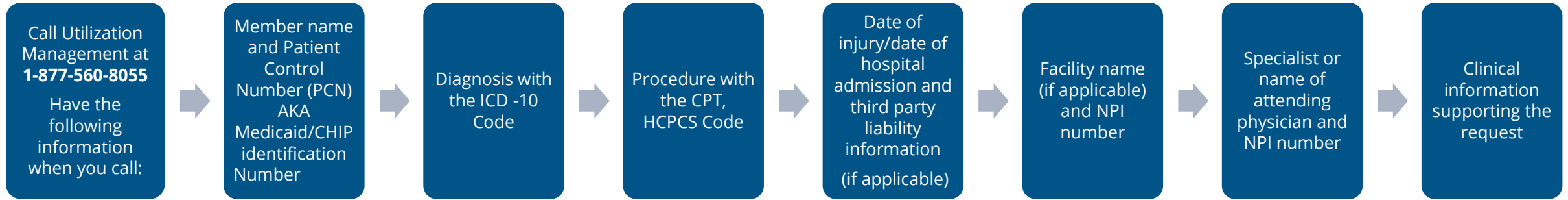


# Services Not Requiring a Prior Authorization

In Network  
services not  
requiring a prior  
authorization

- Diagnosis and treatment of sexually transmitted diseases
- Testing for the Human Immunodeficiency Virus (HIV)
- Family Planning services to prevent or delay pregnancy
- Behavioral Health Outpatient Services
- Annual Well Women exam
- Prenatal services
- Texas Health Steps
- **Additional Services may apply**

# Submitting a Prior Authorization



## Turn Around Times:

### 24 Hours

Concurrent Stay requests (when a member is currently in a hospital bed)

### 3 Business Days

Prior authorization requests (before outpatient service has been provided)

### 72 hours

Urgent prior authorization requests are initiated before outpatient services have been provided and are reviewed within this time frame. \*

## Phone numbers:

- STAR/CHIP: **1-877-560-8055**
- STAR Kids: **1-877-784-6802**

**\*URGENT Prior Authorization is defined as a condition that a delay in service could result in harm to a member.**

**Note: BCBSTX [Prior Authorization form](#) or the [Standard Authorization form](#) must be included with submission.**

# eviCore healthcare (eviCore)® Prior Authorizations

## Using eviCore

<p>Providers initiate prior authorization for certain services through our BCBSTX partner eviCore.</p>	<p>24/7 Availability to submit prior authorizations request and check status via online eviCore.</p>	<p>To register and receive training using eviCore, please contact your BCBSTX Provider Representative.</p>	<p><u>Prior Authorization Call Center:</u> 7:00am- 7:00pm M-F, <b>1-855-252-1117</b> Website: <a href="http://www.evicore.com">www.evicore.com</a></p> <p><u>Web Based Services:</u> <a href="mailto:portal.support@evicore.com">portal.support@evicore.com</a> <b>1-800-646-0418 Option 2</b></p> <p><u>Client Providers Operations:</u> <a href="mailto:clientservices@evicore.com">clientservices@evicore.com</a></p>	<p>Providers seeking Prior Authorizations for the following type of services will be required to use eviCore:</p> <ol style="list-style-type: none"><li>1. Radiology</li><li>2. Medical Oncology</li><li>3. Molecular Genetics</li><li>4. Musculoskeletal (OT,PT,ST,Chiro, Joint, and Pain)</li><li>5. Radiation Therapy</li><li>6. Sleep</li><li>7. Specialty Drug</li></ol>
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**Note: eviCore does not process claims.**





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# Service Management and Service Coordination

# Service Management Team – STAR and CHIP

Service Management is a benefit provided to STAR and CHIP members to help manage their health care needs. You can help coordinate care for our members and improve their health by working directly with them and their family. Our Blue Cross and Blue Shield (BCBSTX) Service Manager will look at the member's medical, behavioral, social and educational needs and work with other specially trained members of the BCBSTX Service Management team to design a care plan.

Make care plans, answer questions and talk to our members about ideas to reach their health goals

Help set up care with your doctor and specialists

Help our members, their family and caregiver better understand their health condition(s), medications and treatments

Get the community support and services our members need:

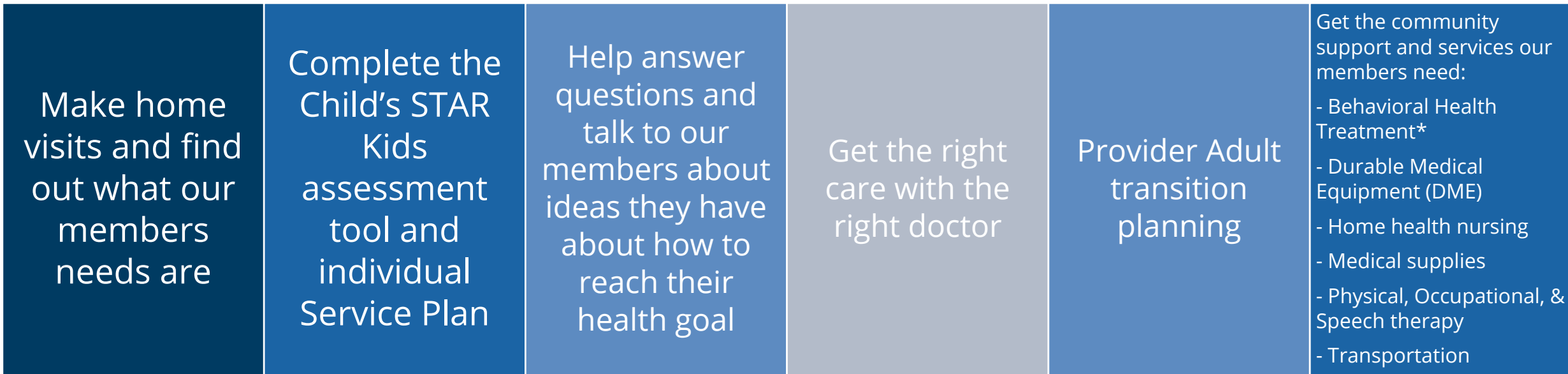
- Behavioral Health Treatment\*
- Durable Medical Equipment (DME)
- Home health nursing
- Medical supplies
- Physical, Occupational, & Speech therapy
- Transportation

**IF** our member is eligible for these services, and the service is medically necessary, the dedicated Service Manager will help you receive these services.

# Service Coordination Team – STAR Kids

Service Coordination is a STAR Kids benefit that helps our members choose services and plan so that our members can live in the most independent setting possible.

A BCBSTX service coordinator will be working directly with the members, their family and you to meet health care and long-term services or support needs.



**IF** our member is eligible for these services, and the service is medically necessary, the dedicated Service coordinator will help you receive these services.



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# Submitting Appeals and Complaints





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# Submitting Complaints



# Submitting a Member Complaint

A Complaint is defined as any expression of dissatisfaction about any matter related to BCBSTX except for an action or an adverse determination (i.e. any denial, reduction, or termination of benefits in whole or in part denial of services).

A member or provider or authorized representative can file a complaint.

A complaint can be **filed anytime**.

Within 30 Calendar days of receipt of complaint, it must be resolved.

**Note:** If the member is minor or is incompetent or incapacitated, the parent, guardian, conservator, relative or other designee of the member, as appropriate, may submit the complaint.

## Ways to Submit Complaints :

Call a Customer Advocate at  
**1- 888-657-6061** STAR and CHIP

**1-877-688-1811** STAR Kids

**submit in writing to:**

**Call a BCBSTX Member Advocate  
toll free at 1-877-375-9097 (711).**

Return the **Complaints form** to:  
**Blue Cross and Blue Shield  
of Texas**  
Attn: Complaints and Appeals Dept.  
PO Box 660717  
Dallas, TX 75266-0717  
Fax: 1-855-235-1055

**Call the Managed Care Help Line:  
1-866-566-8989 (toll free).**

**Texas Health and Human  
Services Commission**

Office of the Ombudsman,  
MC H-700  
P.O. Box 13247  
Austin, TX 78711-3247  
Fax: 1-888-780-8099 (toll-free)

**Note:** For more information on how a member can submit a complaint:

**HHSC Member Complaints.**

# Submitting a Provider Complaint

Physician and other professional provider complaints and appeals are classified into categories for processing by BCBSTX as follows:

Complaints relating to the operations of BCBSTX.

Physician and other professional provider appeals related to Adverse Determinations.

**Physician and other professional provider appeals of non-medical necessity claims determinations.**

## Ways to Submit Complaints :

Calling Customer Service at  
**1- 877-560-8055** STAR and CHIP

**1-877-784-6802** STAR Kids

**submit in writing to:**

### **Texas Health and Human Services Commission Provider Complaints**

Health Plan Operations, H320  
P.O. Box 85200  
Austin, TX 78708

Complaints may also be  
emailed to:

[HPM\\_complaints@hpsc.state.tx](mailto:HPM_complaints@hpsc.state.tx)

### **CHIP care providers: Texas Department of Insurance (TDI)**

Texas Department of Insurance  
Consumer Protection (111-1A)  
P.O. Box 149091

Austin, TX 78714 -9091  
Complaints may also be  
emailed to:

[ConsumerProtection@tdi.texas.gov](mailto:ConsumerProtection@tdi.texas.gov)



BlueCross BlueShield of Texas

# Submitting Appeals





# Submitting Appeals and Fair Hearing

## Filing a Standard Appeal:

An Appeal is defined as a request for review of an action or adverse determination, which is any denial, reduction, or termination of benefits in whole or in part.

Within **60 Calendar** days of the notice date on an action letter advising of the adverse determination, a Member or Provider may file an appeal.

Appeals and Resolved Dates:

Within **5 Business** days Acknowledgement letter sent to providers

Within **30 Calendar** days (standard appeal) unless extension is needed

Within **72 hours** (emergency appeals)

Within **1 working day** (if a request for continued stay)

Submit an Appeal, State Fair Hearing or External Medical Review request by calling:

A Customer Advocate at **1-888-657-6061 (711)** as first option

A Member Advocate at **1-877-375-9097 (711)**

## State Fair Hearings and External Medical Reviews:

A STAR or STAR Kids member who is not satisfied with the decision made on the appeal can request a State Fair Hearing with or without an External Medical Review.

A request must be submitted within 120 days from the notice of adverse determination. (CHIP members can request an IRO)

**Appeals, State Fair Hearings and External Medical Review request forms can be submitted to:**

Blue Cross and Blue Shield of Texas

Attention: Appeal Department

PO Box 660717

Dallas, TX 75266-0717

Fax: **1-855-235-1055**

Email: **GPDTXMedicaidAG@bcbsnm.com.**

**Find plan specific complaints, appeals, State Fair Hearing and External Medical Review forms at the respective member site.**

[www.bcbstx.com/starkids](http://www.bcbstx.com/starkids)

[www.bcbstx.com/chip](http://www.bcbstx.com/chip)

[www.bcbstx.com/star](http://www.bcbstx.com/star)

# Claims Reconsideration

Claims reconsideration is review of a claim for payment reconsideration. Claims are either rejected at the EDI gateway, or the claims is adjudicated in our claim system for payment reconsideration.

Provider or authorized representative can file a claims reconsideration.

## Deadlines:

95 days from initial timely filing

120-day claims reconsideration deadline from date of first denial

Email completed forms and all attachments to:

Blue Cross and Blue Shield of Texas

Claims Reconsiderations

Texas Medicaid Network Department

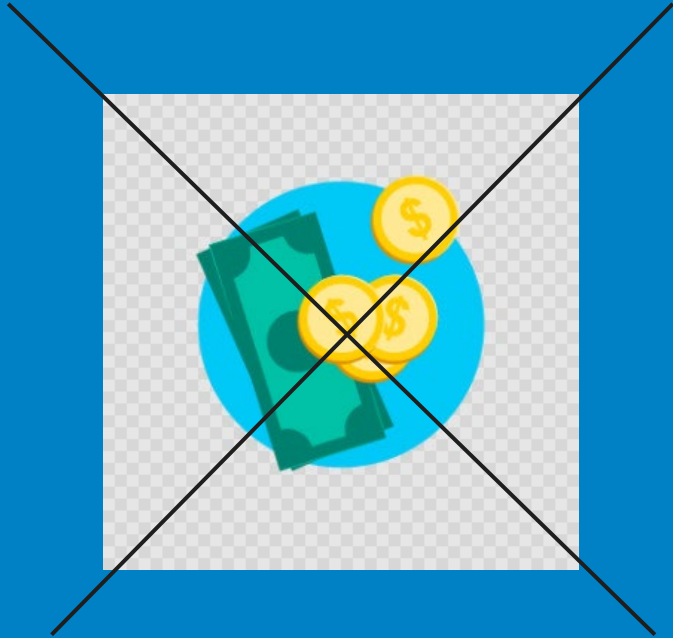
Email: [TexasmedicaidNetworkDepartment@bcbstx.com](mailto:TexasmedicaidNetworkDepartment@bcbstx.com)

## **What must be included with submission**

Certain claims must be sent with accompanying documentation for a claim to be reconsidered:

- Reconsideration Request Form
- Primary Insurance EOB
- Sterilization forms
- Invoice/MSRP
- Itemized bill
- Unlisted procedure code/procedure code documentation
- Medical records related to a claim denial

# Balance Billing Members



- Balancing Billing Medicaid Members is not allowed
- Please contact your provider network representative at 1-855-212-1615

# Customer Service and Important Contact Numbers

## STAR and CHIP Customer Service

Provider: **1-877-560-8055**

Member: **1-888-657-6061**

TTY: 711

**Telephone Support available Monday to Friday  
8 a.m. to 5 p.m. CST**

Web Support Available through Availity: [www.availity.com](http://www.availity.com)

## STAR Kids Customer Service

Provider: **1-877-784-6802**

Member: **1-877-688-1811**

TTY: 771

**Telephone Support available Monday to Friday  
8 a.m. to 5 p.m. CST**

Web Support available through Availity: [www.availity.com](http://www.availity.com)

## Nurse Advise Line: STAR, CHIP, and STAR Kids

STAR and CHIP: **1-844-971-8906**

STAR Kids: **1-855-802-4614**

Available 24 hours a day, 7 days a week

## Interpreter Services Language Assistance is available at no cost

### Member

- Call Customer Service at **1-888-657-6061** STAR & CHIP **1-877-688-1811** STAR Kids to request interpreter services
- Request: Please request service three business days in advance
- Cancellation: Please provide 24 business hours notice

### Provider

- **1-877-560-8055** STAR & CHIP **1-877-784-6802** STAR Kids
- Request: Please request service three business days in advance
- Cancellation: Please provide 24 business hours notice
- BCBSTX Provider Website <https://www.bcbstx.com/provider/medicaid/>

# “NEW” Medicaid Simplified Podcast



## Medicaid | Simplified

Hosted by Blue Cross and Blue Shield of Texas

Blue Cross and Blue Shield of Texas, a Division of Health Care Service Corporation,  
a Mutual Legal Reserve Company, an Independent Licensee of the Blue Cross and Blue Shield Association

Are you a Medicaid health care provider? If so, you might benefit from our new podcast, *Medicaid Simplified*. It's designed to help health care providers deliver optimal care for Medicaid members.

Each month, DSVP of Health Care Delivery Shara McClure and Executive Director of Public Networks Pamela Cobb will discuss tips and resources that support health care professionals in their efforts to care for Texans covered by Medicaid.

### **Some of the topics discussed:**

- **THSteps: Important Milestones for Pediatric Patients**
- **How Physicians Can Empower Texas' Most Vulnerable Women**
- **How to Improve Your Consumer Assessment of Healthcare Provider Systems (CAHPS) Survey Score**
- **Claims Reconsideration vs. Claims Appeals**
- **Get Your Time Back: An Introduction to PEMS**
- **Teamwork Makes the Medicaid Dream Work**

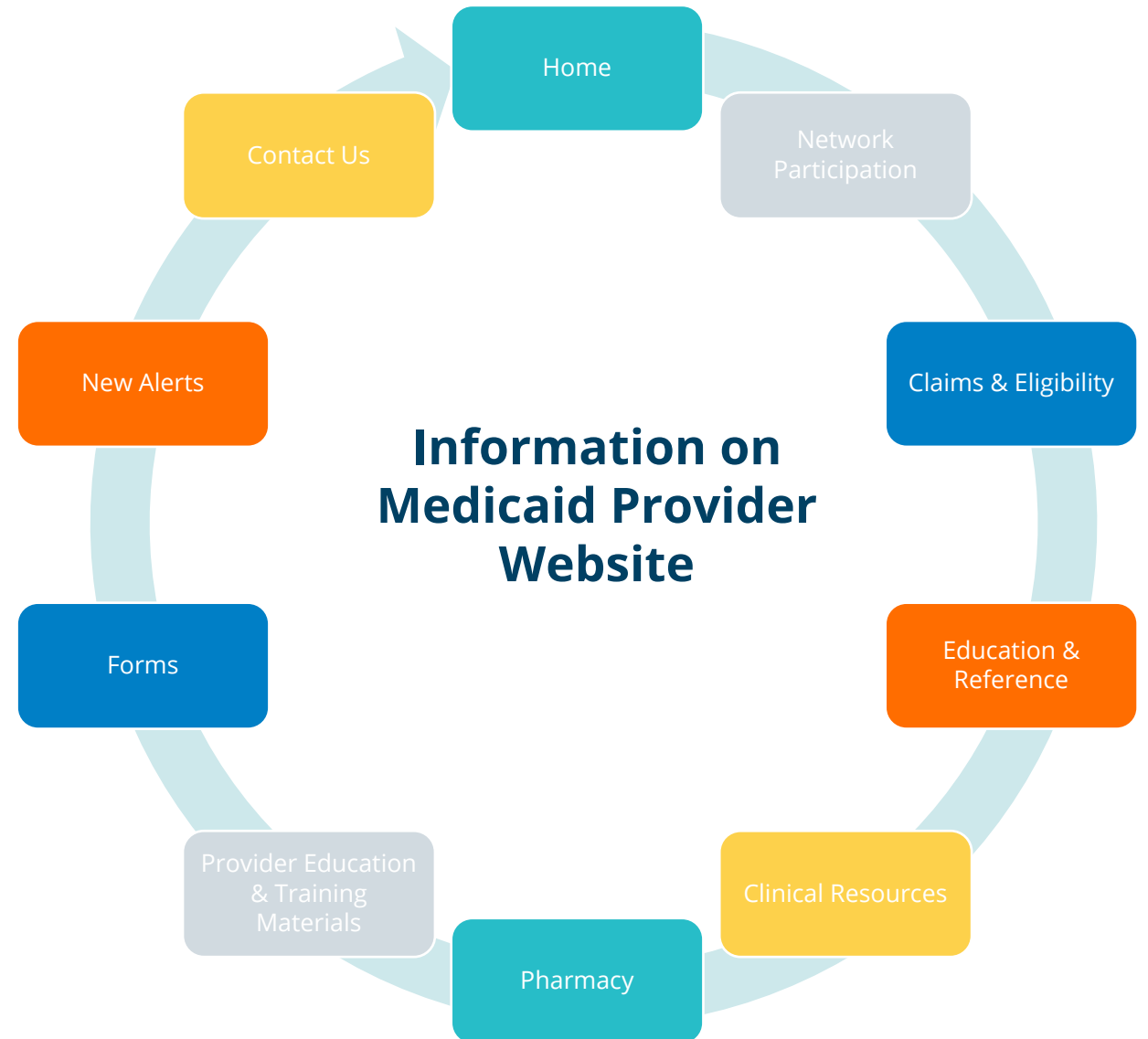
These amazing topics are now available wherever you listen to podcast or visit our webpage [Medicaid Simplified](#).

# BCBSTX Medicaid Provider Website



Website link:

<https://www.bcbstx.com/provider/medicaid>



# Disclaimers

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BlueCross BlueShield of Texas

Questions?

Please contact:

BCBSTX Network Representatives

Phone: **1-855-212-1615**

[TexasMedicaidNetworkDepartment@bcbstx.com](mailto:TexasMedicaidNetworkDepartment@bcbstx.com)