

News from the **Blues**SM for producers



BlueCross BlueShield of Illinois
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August 18, 2010

2-150 Standard Product Changes Effective Oct. 1, 2010 [Group Markets]

Modifications are being made to Blue Cross and Blue Shield of Illinois products to be compliant with provisions of the **Patient Protection and Affordable Care Act of 2010 (PPACA)**.

Changes take effect for new and renewing business beginning Oct. 1, 2010, for 2-50 and 51-150 standard products. **In addition to new plan ID numbers, the following changes are being implemented:**

- No life time benefit maximums
- **Well Adult Care** (age 16 and over) and **Well Child Care** (to age 16) will be replaced with **Preventive Care** (only for new groups and renewing groups making plan changes)
- Eliminating benefit maximums for **Therapy Services – Speech, Occupational and Physical, Temporomandibular Joint (TMJ) Dysfunction and Related Disorders**
- **Private Duty Nursing** benefit maximum per month will reference “Please refer to Certificate for details,” which will reflect no limit of benefit

Blue Care Connection® Change

Beginning Jan. 1, 2011, for new and renewing business, preauthorization will now be the responsibility of the member. Additionally, outpatient mental health and substance abuse now require preauthorization.

- **Blue Care Connection (BCC)** language has changed due to preauthorization associated with Care Management Program. The new language is: “When members receive covered inpatient hospital services, outpatient mental health and substance abuse services (MHSA), coordinated home care, skilled nursing facility or private duty nursing from a participating provider, the member will be responsible for contacting either the BCC or MHSA preauthorization line, as applicable. You must call one day prior to any hospital admission and/or outpatient MH/SA service or within 2 business days after an emergency medical or maternity admission. Please refer to your benefit booklet for information regarding benefit reductions based on failure to contact the applicable preauthorization line. **Note: Outpatient MHSA preauthorization is effective for services on or after January 1, 2011.**”

These changes will be reflected on the product Highlight Sheets that will be available shortly – check Blue Access® for Producers for the updated sheets.

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