Focused on making your job easier, faster, and more productive ... February 2007

CareCalcSM May Improve Your Bottom Line . . . Here's How!

The Cold Hard Facts . . .

As patients take on more responsibility for health care expenses due to higher out-of-pocket plans and other trends related to consumer-directed health care (CDHC), providers find themselves under increasing pressure to determine how much to collect from the patient at the point of service.

Simply put, providers need to collect payment from the patient before he or she leaves the provider office, or risk accounts receivable nightmares.

The Good News . . . CareCalc!

Availity and Blue Cross and Blue Shield of Florida (BCBSF) have listened to provider demands and worked together to develop a new tool to calculate the patient's financial responsibility: CareCalc.

CareCalc is a real-time estimator based on the most current information in the payer's system, including the provider's contracted rate schedule and the member's benefit information. CareCalc displays current, relevant amounts, such as the allowed amount, co-insurance, co-pay, non-covered amount, and the estimated patient responsibility amount for each procedure performed during the visit.

CareCalc results are similar to a receipt in that they display as an itemized list of the procedures performed and the total financial liability for the patient's visit. You may even print a copy of the results for your records or to give to the patient.

How it Works . . .

CareCalc is accessed through Availity's Eligibility and Benefits Inquiry (E&B) transaction. If your office is participating in the CareCalc program and CareCalc is available for that patient, a **CareCalc** button displays on the E&B results page after you run an E&B for that patient. After clicking the **CareCalc** button, enter the diagnosis and any procedures that you would like to estimate, and then click **Submit**.

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Depending on your provider office workflow, you may use CareCalc to estimate a patient's responsibility prior to service -- perhaps when a patient calls your office to learn their estimated costs -- and at the point of service, once all procedures have been performed.

Want in? Who to Contact . . .

Contact your BCBSF representative (800.727.2227) to learn more about CareCalc or if you want access to this tool.

Upcoming Webinars

Live webinars last one hour. To register, click **Free Training** on any Availity page and follow the instructions.

- **Web Training** (FL) - 2/4 at 12:00 pm ET
- **Web Training** (outside FL) - 2/7 at 11:00 am MT, 12:00 pm CT, 1:00 pm ET
- **EDI Training** (all regions) - 2/8 at 10:00 am MT, 11:00 am CT, 12:00 pm ET
- **Express Entry** (all regions) - 2/14 at 10:00 am MT, 11:00 am CT, 12:00 pm ET
- **PAA Training** (all regions) - 2/15 at 10:00 am MT, 11:00 am CT, 12:00 pm ET

Where's Availity?

Availity will attend these events:

- **Texas Technology Week** - 2/2-2/5, Austin (http://www.aeanet.org/Events/txja_techweek07.asp)
- **ASC X12 / WEDI Real-Time Adjudication Conference** - 2/13-2/14, Herndon, VA (http://www.x12.org/RTA2007.cfm)
- **HIMSS Conference 2007** - 2/25-3/1, New Orleans (http://www.himss07.org/)
- **American Medical Group Association (AMGA) 2007 Conference** - 2/28-3/3, Scottsdale, AZ (http://www.amga.org/Education/AnnualConf/index_annual-Conf.asp)

Customer Service Corner

Staff Changes? Please Revoke Old User IDs!

If anyone has left your organization or someone still on your staff no longer uses Availity, now is a great time to revoke those old user IDs.

By revoking old user IDs, you protect your organization from fraud and other unauthorized uses of Availity.

If you are a Primary Access Administrator (PAA), please use the steps later in this article to revoke old user IDs.

If you are not the PAA, feel free to share this article with your PAA. Don't know who that is? Click **Who Controls My Access?** at the top of any Availity page after you log in.

PAAs can follow these steps:

1. In the Availity menu on the left side of the page, click **Account Administration | Manage User Status**.
2. In the list, click the employee's name.
3. On the next page, click **Revoke User**.
4. Complete the **Comments** field. The **Reason** field automatically displays **Revoked**.

5. Under **Beginning**, specify the date you want to revoke the employee. To revoke the employee effective immediately, click **Set begin date and time to Now**.
6. Click **Submit New Action**.

For assistance, please call Availity at 1.800.AVAILITY (282-4548).

Updating Organization Information

Primary Access Administrators (PAAs) are responsbile for keeping their organization's information updated and accurate in Availity.

If the name, address, phone number, or fax number for your organiuzation has changed, you can quickly update the system by clicking **Account Administration | Maintain Org Information** in the Availity menu. If you are PAA for more than one organization, select its name. Then on the next page, make your changes and click **Next**. At this point, you can specify an address different from the mailing address for shipping or other purposes.

By keeping your organization's information updated, you can be sure to receive any important information by mail or telephone.

For assistance, please call Availity at 1.800.AVAILITY (282-4548).

Calling All Medicare Providers!

CMS (Centers for Medicare and Medicaid Services) needs your help informing Medicare patients and their caregivers about the many preventive services and screenings covered by Medicare, including:

- A **one-time "Welcome to Medicare" physical exam**, for which the patient is eligible within the first six months of enrolling in Medicare Part B

- **Cardiovascular screening** to check cholesterol, lipid levels, and other blood fats

- **Diabetes screening** using the Fasting Plasma Glucose Test

Things you can do:

- Check out Medicare's web site for answers to common questions: http://questions.cms.hhs.gov

- Download or order publications, videos, quick reference guides, CD-ROMs, web-based training, and other educational materials: http://www.cms.hhs.gov/MLNProducts/

- Check out the National Monthly Health Observances: http://www.cms.hhs.gov/MLNProducts/Downloads/prev_aware_comm_arch.pdf

- Sign up for monthly prevention awareness messages corresponding with the National Monthly Health Observances: http://www.cms.hhs.gov/apps/mailinglists/

- Print and share the *Guide to Preventive Services* with your patients: http://www.medicare.gov/Publications/Pubs/pdf/10110.pdf

Availity e-Focus **Crossword Puzzle**

Click the **Print** icon in the Adobe Reader toolbar to print the newsletter or just the crossword. Unless hints are noted, you can find answers scattered throughout this issue. The solution will be published in the next issue.

Across

3. Medicare covers this screening, which uses the Fasting Plasma Glucose Test.
4. Centers for Medicare and Medicaid Services. (abbr)
8. CareCalc is accessed through Availity's _____ Inquiry transaction. (3 words)
9. Only the _____ can do 10 Across and 6 Down. (abbr)
10. User IDs of staff who have left the organization or who no longer use Availity should be _____.
11. For the CareCalc inquiry itself, you need to enter only the diagnosis and any _____ that you want to estimate.
14. Medicare covers this screening, which checks cholesterol and lipid levels.
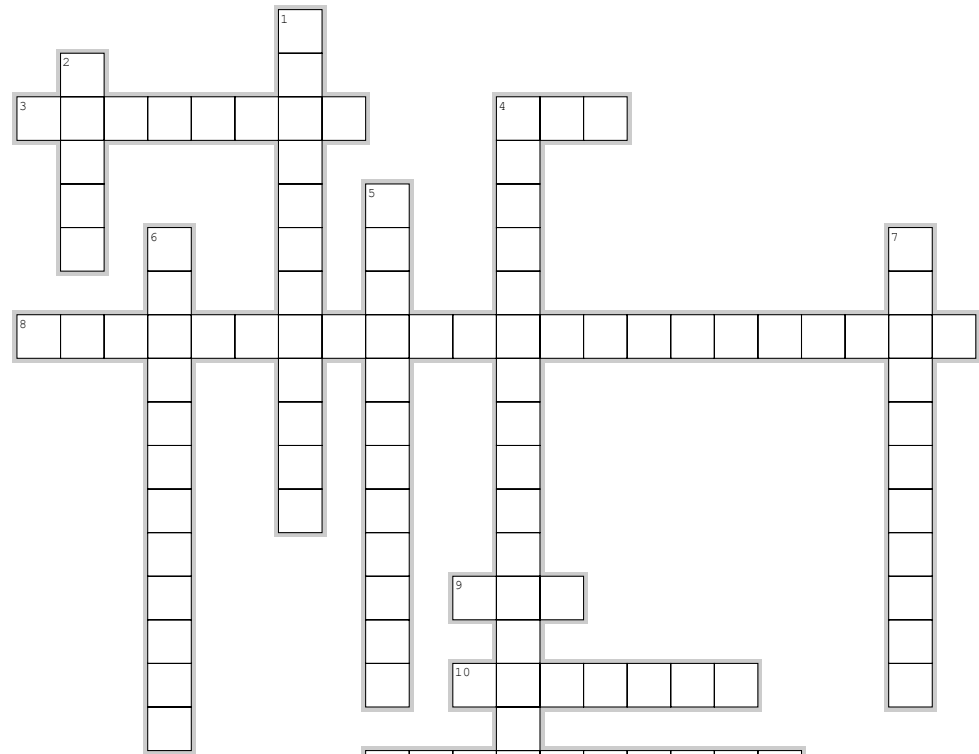
Down

1. To register for a live webinar, click this button on any Availity page and follow instructions. (2 words)
2. This conference is being held in New Orleans.
4. CareCalc is based on the most current information in the payer's system, including the member's and benefit information and the provider's _____. (3 words)
5. AMGA stands for American _____ _____ Association. (2 words)
6. If the name, address, phone number, or fax number for your _____ has changed, update it with Availity to ensure you can receive any important information by mail or telephone.
7. More patients become responsible for health care expenses due to higher _____ plans and other CDHC trends. (3 words)
12. This payer and Availity have worked together to bring you CareCalc, which can help providers calculate the patient's financial responsibility at the point of service. (abbr)
13. A patient is eligible for a one-time "Welcome to Medicare" physical exam within the first _____ months of enrolling in Medicare Part B.

Solution to the January issue's puzzle:

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