

PRIVATE INSURANCE UPDATES – NEW CARD NUMBER

Recently, the Central Business Office (CBO) was notified that clients covered by some Anthem Blue Cross plans including CareMore/Anthem Blue Cross Medicare Advantage Plan and Care1st Blue Cross/Blue Shield received new member cards with new policy numbers. These policy numbers are effective for dates of service on or after January 1, 2019.

Clients should be asked to confirm their insurance coverage at the time of their appointment. Oftentimes, private insurance companies will mail out correspondence to the clients regarding changes to the client's insurance. Provider staff should ask for and review insurance cards to verify all information, including policy numbers. It is important for staff to update the client's financial profile with changes in a client's private insurance. Reviewing and updating policy information helps ensure that claims are sent to the correct plan and reduces the potential for overbilling Medi-Cal.

When a client presents a new policy number for a guarantor or payer that is already in their financial profile, make sure that the following information is in the financial record for the client.

- ✓ Client ID number and name
- ✓ Old policy number
- ✓ New policy number
- ✓ Effective date of the new number
- ✓ Whether the new number should be used on claims for services on or after the effective date or on claims for all services regardless of the service date
 - Collect this information when calling for authorization and verifying eligibility
- ✓ Confirmation that the new card has been scanned into the client's chart

Some Electronic Health Records (EHR) are able to store both the old policy number and the new policy number in the client's financial profile. Please contact the vendor to determine how the new and old policy numbers must be entered into the EHR so that the right policy number is on the insurance claim.