Dear Provider:

Blue Cross and Blue Shield of Vermont (BCBSVT) requires the reporting of services using the industry standard coding of Current Procedural Terminology (CPT) and/or Health Care Procedure Coding Systems (HCPCS).

On a quarterly basis, CPT and HCPCS codes are updated and revised and new codes are added. The changes are effective the first day of the month in January, April, July and October.

Starting with the January 2015 update, we will have a change in our notification process.

As soon as BCBSVT has completed the review of the new/revised/deleted codes we will post a notice to the news area of our provider website at www.bcbsvt.com advising of any changes in prior approval requirements, changes in unit designation, and any other information you should be aware of specific to the new/revised/deleted codes. The posting will appear no later than at least two weeks prior to the effective date.

This change will allow us to get accurate information to your offices in a timely, more efficient manner.

As noted above, this new notification process will begin with the January 2015 update, so information related to the upcoming code sets will be available on our provider website no later than December 17, 2014.

Thank you for your time. If you have any questions regarding these changes, please feel free to contact your provider relations consultant at (888) 449-0443 or through e-mail at providerrelations@bcbsvt.com. Business hours are Monday through Friday, 8 a.m. – 4:30 p.m.

Sincerely,

Cynthia E. Horan
Director, Provider Relations