

2024 BCBSRI Duals Special Needs Plan (D-SNP) Model of Care (MOC)

BlueRI for Duals Provider FAQ



BlueRI For Duals, Quick Facts

- ✓ Link to BlueRI for Duals 2024 Flyer: [BMED-962947 2024 Duals \(DSNP\) Prospect Flier FA2.pdf](#)
- 1. Plan Requirements, beneficiaries must be a
 1. Rhode Island resident
 2. Enrolled in Medicare A+ B
 3. And have one of the following Medicaid Status Categories:
 - Speak directly with our Duals Benefit Consultant to determine patient eligibility*
 - QMB+ (Qualified Medicare Beneficiary with Medicaid Coverage)
 - SLMB+ (Specified Low-Income Medicare Beneficiary with Medicaid Coverage)
 - FBDE (Full Benefit Dual Eligible)
 - QMB-Only (Qualified Medicare Beneficiary without Medicaid Coverage)

Provider Office FAQs

PLAN BASICS

[BMED-931490 2024 Blue Difference Brochure Duals EBOOK FA.pdf \(bcbsri.com\)](#)

1. What is BlueRI for Duals?

Blue Cross & Blue Shield of Rhode Island (BCBSRI) will begin offering a dual special needs plan, or D-SNP, to eligible Rhode Islanders. The plan is called **BlueRI for Duals** (subscribers have a Z9K prefix) and was first available January 1, 2022.
2. What is a D-SNP?

A dual special needs plan – or D-SNP, is a special type of Medicare Advantage plan that provides health benefits for people who are “dually eligible,” meaning they qualify for both Medicare and Medicaid.
3. Who is eligible for D-SNP?

All full dual eligibles are eligible for BlueRI for Duals. Partial eligibles that are considered Qualified Medicare Beneficiaries (QMB) are eligible as well.
4. When can a member enroll in a D-SNP?

D-SNP eligibles can participate in the Special Enrollment Period, meaning they can enroll in the plan at any point throughout the year. Specifically- They are allowed to choose a new plan once per quarter during the first three quarters of the year, as well as during the Annual Open Enrollment period for a January 1st enrollment.
5. What services are covered by BlueRI for Duals?

BlueRI for Duals covers Medicare A and B benefits, supplemented by additional benefits tailored to the dual eligible population. Use this link to view key 2024 supplemental benefits, BMED-962947_2024_Duals_(DSNP)_Prospect_Flier_FA2.pdf. Beneficiaries also access their Medicaid benefits via Rhode Island Medicaid.

6. Are referrals required to see specialists?
No. PCP Referrals are not required for BlueRI for Duals members.
7. Are authorizations required and managed through MHK?
Yes. Processes in place for managing Medicare Advantage members will apply to D-SNP members. Coverage of Medicaid benefits will be managed by Rhode Island Medicaid.
8. How do I know if a member is eligible?
Our team of Medicaid Specialists can help you determine if your patient is eligible for BlueRI for Duals. For information call the BCBSRI Provider Call Center, at (401) 274-4848. Or you may email ProviderRelations@bcsri.org.
9. Will BCBSRI support Medicaid recertification?
Yes. Our Medicaid Specialists assist D-SNP members with the annual recertification process and long-term services and supports (LTSS) applications.
10. What happens when a member loses eligibility?
If a member loses eligibility, BCBSRI grants them a 90-day grace period. Members are actively supported by a BCBSRI Medicaid Specialist in effort to regain Medicaid.
11. Is acupuncture covered as a benefit with D-SNP?
Yes, acupuncture is covered with \$0 copay.
12. Are D-SNP members eligible for Medicare wellness visits? Can you confirm if that's a covered benefit within the new plan?
Yes. Medicare wellness visits are a covered benefit with no member liability.

NETWORK

13. Am I part of the D-SNP product if I am a specialist?
Yes. All specialists are included in this plan if they opted into Medicare.
14. Am I part of the D-SNP product if I am a Dentist?
Yes. All dentists who are opted in with Medicare are included in this plan. BlueRI for Duals offers robust dental benefits.
15. Can I opt out of this product?
No. If you are opted into Medicare, you are a participating provider with all Medicare Advantage plans including D-SNP. You can opt out of Medicare with CMS, however will not be allowed to see any Medicare patients after being opted out.
16. What if I am opted out of Medicare? Am I part of this network?

No. If you are opted out of Medicare, you will not be part of this network as it is under the Medicare Advantage umbrella of networks.

BILLING

17. Will reimbursement change for D-SNP members?

Reimbursement for D-SNP members will be at the Medicare Advantage rate following your current fee schedule. For all Billing and related questions please refer to normal BCBSRI billing/claims submissions procedures outlined in the Provider Administrative Manual for BlueCHIP for Medicare.

18. Will reimbursement be the same?

Yes, you will be reimbursed at the rates/fee schedule you are reimbursed at today for Medicare Advantage members.

19. How does the billing work?

Submit D-SNP member claims to BCBSRI for benefit review and disbarment. If something is not covered by the plan, you as a provider cannot bill the member for this type of plan but can bill to Medicaid for payment with a copy of the RA denial.

PROVIDER TRAINING, ANNUAL CMS REQUIREMENT

[D-SNP Training | Blue Cross & Blue Shield of Rhode Island \(bcbsri.com\)](#)

20. What training/education is required and/or available?

MOC provider training (with attestation) is a CMS annual requirement. Training is available via three modes:

- a. Self-led instruction on bcbsri.com: [PowerPoint Presentation \(bcbsri.com\)](#)
- b. Personalized group training, via Teams or in-person. Contact ProviderRelations@bcbsri.org for scheduling.
- c. Teams based group instruction beginning in Q4 through Q1 of the active D-SNP year.
- d. Attestation is required and confirms training is complete: [Provider D-SNP Training Attestation | Blue Cross & Blue Shield of Rhode Island \(bcbsri.com\)](#)

21. Who needs to complete training?

All providers in the D-SNP network must complete the training. Provider training cannot be delegated.

22. Does every provider in my group need to take the training and attest?

Yes. If you have 150 providers in your group, all 150 will need to take the training and fill out the attestation form.

23. If the provider does not attend the training, will BCBSRI follow up?

Yes, BCBSRI will follow up with the individual provider after the Q1 deadline.. The provider then has 10 days to complete the training. If after the 10 days the provider fails to complete the training, BCBSRI Leadership will follow up with the provider directly.

24. Can we save the PowerPoint as a PDF and distribute to all of our providers? And once they review the PDF, they will go in and attest?

Yes, you can do that, and the providers will need to fill out the attestation form too.

MODEL OF CARE (MOC) AND CARE MANAGEMENT SERVICES

25. What is BCBSRI's D-SNP Model of Care?

A MOC is a plan's D-SNP roadmap. BCBSRI's model of care features an interdisciplinary care team with all providers involved in a member's care collaborating to design and implement an individualized care plan. Every BlueRI for Duals member is assigned a BSBSRI Health Navigator and BCBSRI Care Manager to assist them.

26. Health Navigators

The Health Navigator works closely with D-SNP members, on the phone or in their home, to coordinate the services and healthcare they need. From setting up doctors' appointments, arranging transportation, referring to community agencies for help with housing, coordinating an in-home companion, securing home care services, and so much more.

27. Who will be responsible for providing Care Management to D-SNP members?

BCBSRI RN Care Managers are responsible for providing care management services to these members. They collaborate with providers and practice-based care managers as part of the Interdisciplinary Care Team (ICT) to implement an actionable, holistic Individualized Care Plan.