New Diabetes Care Module Coming, September 2015

implementation of the first module, asthma/COPD care.

Medavie Blue Cross Managing Chronic Disease Benefit

In early 2015, Medavie Blue Cross announced our new approach to managing chronic diseasethe *first program of its kind* in the Canadian private health insurance industry with the

Through this new program, we are pleased to offer our plan members *reimbursement for targeted health services* through a network of designated health professionals offering individualized support and disease management education to eligible plan members living with chronic disease.

We are now pleased to announce the launch of the second module under this program, Diabetes care.

How the Diabetes Care Module works:

Effective September, 2015, eligible plan members living with diabetes will have access to oneon-one diabetes counselling sessions provided by a network of *designated health professionals*- including registered dietitians, registered nurses, pharmacists and other licensed allied healthcare professionals. There will be *no physician referral required*, so eligible members will have direct access to these services.

Diabetes care services that qualify for reimbursement will include: educational assessments, and the planning and implementation of appropriate interventions and patient supports.

Plan members can connect with a network of providers via the provider search function on our Medavie Mobile app and on our corporate website.



How to Enrol:

To become a participating provider, you must:

- 1) be a licensed health professional such as a registered dietitian, registered nurse, pharmacist or other allied healthcare professional approved by Medavie Blue Cross **AND**
- 2) have current a Certified Diabetes Educator (CDE[®]) certification.

To register, simply visit our website at <u>www.medavie.bluecross.ca/HealthProfessionals</u> **Please ensure you attach a copy of your CDE® certification.** Our goal is to begin mobilizing a network of certified diabetes care providers in advance of our official launch in September to ensure plan members can begin claiming the benefit as soon as it is available.

You can print a *Managing Chronic Disease* claim form or download our provider guide for more information at <u>www.medavie.bluecross.ca/HealthProfessionals</u>.

Questions?

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Please refer to the attached FAQ to help with any questions you may have. If you have additional questions, please email us at inquiry@medavie.bluecross.ca or call:

Atlantic Canada: 1-800-667-4511 Ontario: 1-800-355-9133 Quebec: 1-888-588-1212



Managing Chronic Disease Program FAQ

Q. What types of services are eligible for reimbursement under the new Diabetes Care module?

A. Medavie Blue Cross will provide reimbursement for one-on-one diabetes counselling/education intervention, including:

- Initial consultation (to identify and address learning needs and client's issues related to his/her diabetes as time allows in first consultation)
- Counselling sessions (to address client's learning needs and establish goals with client)
- Follow up sessions (to evaluate and revise goals and interventions as necessary)

Sessions would include discussion on the following:

- Identification of the client's learning needs related to his/her diabetes
- Disease process (pathophysiology, symptoms, chronicity and prevention)
- Appropriate management of disease including pharmacological and nonpharmacological
- Appropriate resources for the client (community resources available, written resources including on-line)

Q. Where can services be rendered?

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It is important to remember that Medavie Blue Cross is supplemental to government health care services- meaning we will not reimburse for any services eligible for coverage under government health care programs or services administered by government funded hospitals, agencies or providers.

We will reimburse eligible services delivered by approved providers in locations such as pharmacies, private clinics/businesses, the client's home, or other private settings.

Q. What services are not eligible under this new benefit?

A. Medavie Blue Cross will not provide reimbursement for:

- Services that would typically be provided free of charge i.e. medication instruction at a pharmacy counter
- Services delivered in the hospital
- Sessions with the members that are less than 15 minutes in duration



Q. How much am I allowed to charge for my services under this program?

A. Medavie Blue Cross sets usual, reasonable and customary (R&C) reimbursement limits on all health services and expenses eligible under our health plans.

The Managing Chronic Disease benefit has a per-visit R&C limit based on initial consultations ranging between 30-60 minutes and follow up sessions ranging between 15-60 minutes. This U&C was set taking into consideration the fees typically charged by eligible practitioners (including dietitians, nurses and Pharmacists), fees charged by other licenced health educators, and fees paid by governments for similar disease management services.

In addition to the per-visit R&C, the Managing Chronic Disease benefit has an overall annual maximum.

Note: The purpose of a health plan is to provide supplemental coverage for expenses that are ineligible through provincial health programs. To be considered an eligible expense, services cannot not be rendered within a hospital (institutional) setting and such expenses must be for services that **all members of the public are charged equally for**, whether or not they have private insurance coverage.

Q. Does this benefit have a pay direct electronic option?

A. No, the member will pay the full cost of any expense to the Approved Provider at the time of service. Medavie Blue Cross will then reimburse the member for eligible expenses on receipt of proof of payment.

Q. How do I know if a Medavie Blue Cross plan member has coverage for these services?

A. Not every Medavie Blue Cross plan member will be eligible for reimbursement for these services. Plan members will be eligible for reimbursement provided that The Managing Chronic Disease program has been added to their benefit plan.

The plan member can check to see if they have coverage for this benefit with our Medavie Mobile app, by visiting our Member Services website, or by calling our Customer Contact Centre at 1-888-873-9200 in their area.

Q. What is the provider criteria for delivering these reimbursable services?

A. Providers registered with Medavie Blue Cross for the Diabetes care module of the Managing Chronic Disease program must have the following credentials:



- Be a health professional such as a dietitian, registered nurse, licensed pharmacist or other allied healthcare professional approved by Medavie Blue Cross **AND**
- Have a valid and current Certified Diabetes Educator (CDE[®]) certification.

Q. Why is CDE[®] certification required?

A. CDE[®] certification is required to ensure the quality and consistency of services delivered to our members. Healthcare professionals who have earned the CDE[®] designation are recognized to a standard of experience and excellence in diabetes education. Certification verifies the individual health care professional's knowledge, abilities and skill required by a diabetes educator to practice safely and effectively. Certification ensures that these healthcare professionals have achieved the required level of competency (skill, knowledge and ability).

Additionally, CDE[®]'s must maintain their designation every five years, to demonstrate that they have kept their skills, knowledge and ability current.

Q. Where can I find out more about CDE[®] certification?

A. The Canadian Certified Diabetes Educator Board (CDECB) is the organization that certifies healthcare professionals as Certified Diabetes Educators (CDE[®]). Visit the Canadian Certified Diabetes Educator Board website at <u>http://www.cdecb.ca</u> for more information regarding these certifications.

Q. How do I register as a provider for this program?

A. To enrol as a registered provider with Medavie Blue Cross for this new benefit simply visit our website at <u>www.medavie.bluecross.ca/HealthProfessionals or click here</u>. Please ensure you attach a copy of your CDE[®] certificate with your registration.

Q. Do I have to sign an agreement to be an approved provider for this program?

A. You are not required to sign an agreement. As per the Medavie Blue Cross Provider Guide, submission of first claim signifies acceptance with the terms and conditions as outlined in the guide. *Please refer to Appendix F for information specific to this program*. You can access the guide on our website or click <u>here</u>.

Q. Do plan members need a physician referral to access these services?

A. No, a physician referral is not required for reimbursement of services under this program. Our plan members will have direct access to approved providers.

Q. How will plan members locate approved providers?



A. Our members can locate approved providers through the provider search function on our Medavie Mobile app and on our corporate website @ http://web.medavie.bluecross.ca/en/members/chronic-disease.

Q. Are the drugs recommended covered under this program, as well?

A. CDEs may discuss drug therapy which is consistent with published medical guidelines and may be appropriate for the client; however, prescribing medications is the responsibility of the physician or other provider whose scope of practice includes prescribing medications.

Costs of drugs and medical supplies are **not eligible** under this Chronic Disease Management benefit however they *may* be covered under the member's drug or extended health care plan. Members can verify reimbursement under their plan by calling our Customer Information Centre in their region.

Q. What do I need to provide plan members so they can submit a claim under their health plan?

A. You need to provide plan members with a paid-in-full receipt along with a completed Managing Chronic Disease Claim Form so they can submit their claim to Medavie Blue Cross for reimbursement.

You can print a *Managing Chronic Disease* claim form by visiting the Health Professionals section of our website or click <u>here</u>.

If you are unable to provide them with a claim form, your paid-in-full receipt must indicate:

- 1) A description of the services provided, and
- 2) The unique Medavie Blue Cross provider ID you were given when you enrolled.

Q. Will members who have been identified as being at risk of developing diabetes be eligible for coverage under this benefit?

A. Members experiencing elevated blood sugars and/or at high risk for developing diabetes would be eligible for reimbursement under this benefit.

Q. Is the "Dietician Benefit" a different benefit from the Diabetes Care Module?

A. The Dietician benefit and the Chronic Disease Management benefit are two separate benefits. Some plan members may have access to Dietitians and/or the Chronic Disease Management benefit. The Dietitian benefit reimburses for the services of a Dietitian for any type of medically necessary services, under the CDM benefit the services of a CDE (which may include Dietitians) are eligible. Neither of these benefits require a physician referral.



Q. In cases where a member has services provided by more than one CDE ie - an RN AND a dietician would this be considered two separate visits?

A. Yes, If a member sees an RN and then sees a dietitian separately, both providers can charge the member for two separate visits as long as the providers are registered with Medavie Blue Cross as an approved CDE[®].

