

## Mandating Self Service: A Look Back

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## History

- Initial push for self service began in 2000
- Opt-in process was promoted through Provider and EDI Reps
- Value of self service
  - To BCBSAL:
    - Reduction in calls to Customer Service
    - Increased consistency of information provided
  - To Providers:
    - Immediate access to information
    - Dedicated toll-free number
    - Priority handling of calls – moved to front of the queue

## Policy

- Applied to participating providers only
- Provider must have electronic access
  - Practice management system
  - Clearinghouse
  - ProviderAccess (BCBSAL web portal)
- Provider must utilize electronic methods to obtain information, for example:
  - Eligibility & benefits
  - Claim status

## Exceptions to Policy

- Provider can contact Customer Service when:
  - Additional clarification is needed on information in electronic transaction
  - Information needed is not provided in electronic transaction
  - System is experiencing down time (BCBSAL, provider site, vendor)

## Non Par Providers

- Use electronic methods to obtain information
  - Practice management system
  - Clearinghouse
  - ProviderAccess (BCBSAL web portal)
- OR
- Use Interactive Voice Response (IVR) system to obtain information

## Non Par Providers

- Non par providers can contact Customer Service when:
  - Additional clarification is needed on information in electronic transaction
  - Information needed is not provided in electronic transaction
  - System is experiencing down time (BCBSAL, provider site, vendor)

## Then

### In 2000

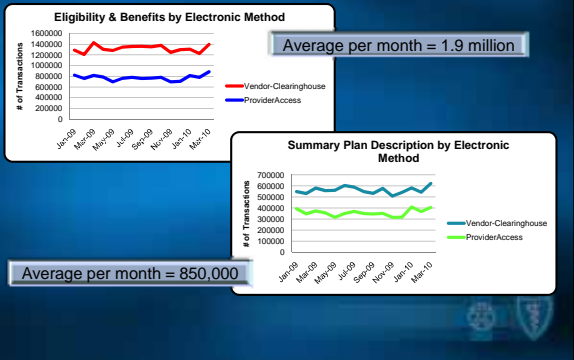
- Limited adoption of electronic access within the provider community
- ProviderAccess web portal had limited functionality
- Majority of providers called into our Customer Service Department to obtain eligibility & benefits, claim status, etc

## Now

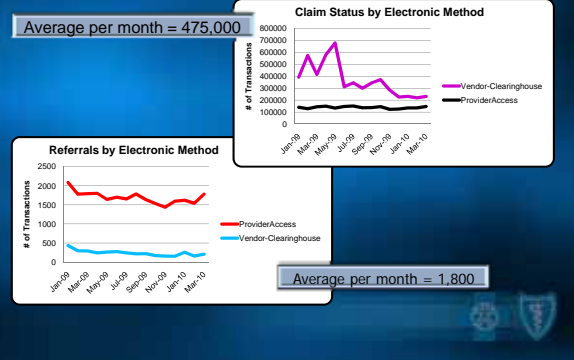
### In 2010

- Provider Inquiries
  - 63% are conducted through a practice management system vendor or clearinghouse
  - 36% are conducted through the ProviderAccess web portal
  - Less than 1% of provider inquiries are made to our Customer Service Department
- 99% of provider inquiries are self service

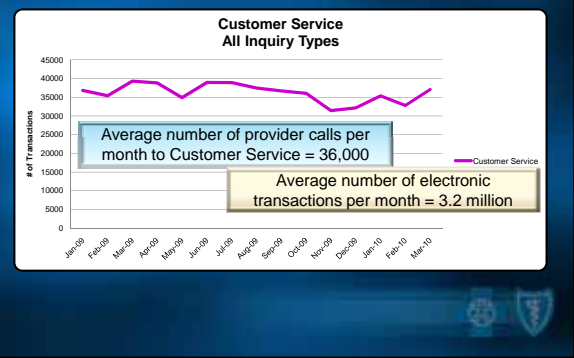
## Current Volumes January 2009 – March 2010



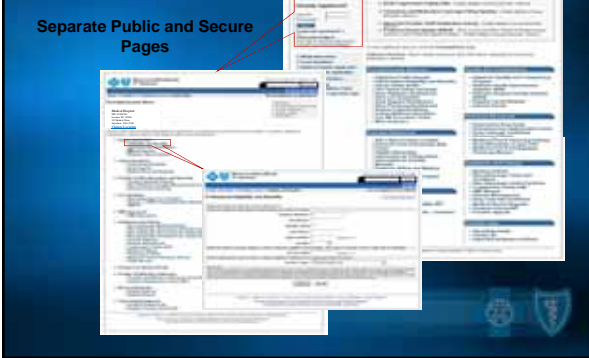
## Current Volumes January 2009 – March 2010



## Current Volumes January 2009 – March 2010



## Current Portal View



## Goals for Portal Redesign

- Integration of public and secure tools
- Improve usability
- Improve provider communication
  - Messaging Center
- Offer additional self service functionality
  - Online provider enrollment
  - Provider performance profiles
- Mobile integration for physician tools

## Future Portal View

### Integrated Public and Secure Pages

The screenshot displays the 'ProviderAccess' portal interface. At the top, there are navigation tabs for 'Home', 'Eligibility & Benefits', 'Claims & Payments', 'Pharmacy', 'Clinical Resources/Polices', and 'Education/Manuals'. Below these is a 'Lock Up Tool' section with a form containing fields for 'Contract Number', 'Last Name', 'First Name', 'Date of Birth', and 'Date of Service', along with a 'SEARCH' button. To the right, there is a 'My Message Center' section with a 'New Message' button and a list of messages. Below that is a 'Want to...' section with links for 'Manage my profile', 'Print My Information', 'Email for an upcoming event', and 'View My Account/Transaction History'. At the bottom, there is a 'Quality & Transparency' section with links for 'Program Details', 'Special Transmittals', and 'Market Tools'. The footer includes 'Online Tools' and 'Provider/Physician Guide'.

## Timeline for Portal Redesign

- Currently in planning phase
- Expect to begin business requirements development in June/July
- Phased roll-out to achieve quick wins early
- Total project will span 18 – 24 months

## Questions?

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