

February 2026 BlueSpeak

Welcome to the February 2026 Bluespeak Provider Newsletter. **If you have questions about these updates, call the Blue KC Provider Hotline at 816-395-3929 for our Commercial line of business or 866-859-3822 for the Affordable Care Act (ACA) Provider Hotline.** Thank you for your partnership in providing quality care to our members.

Medical Policy Updates

The most up-to-date Medical Policy can be found by logging into Providers.BlueKC.com and clicking on the Medical Policies section. While on that web page, you can also find a link to view Milliman Care Guidelines (MCG), which complement our Blue KC policies.

The Blue KC Medical Policy encompasses internal Blue KC Medical Policy, Blue Cross Blue Shield Association derived Medical Policy, and policies adopted from our vendor partners, such as Avalon, MCG and eviCore.

LINES OF BUSINESS IMPACTED						
COMMERCIAL	ACA QHP ¹	SMALL GROUP ACA	JAA ²	FEP ³	Medicare Advantage (BlueCard) ⁴	Dental

BLUE highlighted boxes are the lines of business impacted by this update.

¹ ACA QHP: Affordable Care Act Qualified Health Plan for Individual/Family

² JAA: Joint Administrative Account

³ FEP: Federal Employee Program

⁴ Medicare Advantage (BlueCard): Medicare Advantage for other Blue Cross Blue Shield Association plans

Effective date – 3/1/2026	ID: 7.01.97 Title: Intracoronary Drug Delivery Balloon Procedures – New Policy <ul style="list-style-type: none"> The use of percutaneous coronary intervention (PCI) with a drug-coated balloon (DCB) in adult individuals for treating coronary in-stent restenosis (ISR) is considered investigational.
Effective date – 3/1/2026	ID: 7.01.55 Title: Prostate Artery Embolization – New Policy

	<ul style="list-style-type: none"> Prostate artery embolization is considered investigational as a treatment for benign prostatic hyperplasia.
Effective date – 3/1/2026	<p>ID: 7.01.171</p> <p>Title: Remote Electrical Neuromodulation for Migraines – Interim Update</p> <ul style="list-style-type: none"> When Policy Topic is covered <ul style="list-style-type: none"> Contraindications: <ul style="list-style-type: none"> Remote electrical neuromodulation (REN [e.g. Nerivio]) is contraindicated in patients with uncontrolled epilepsy and patients with an active implantable medical device, such as a pacemaker, hearing aid implant, or any implanted electronic device. Pediatric Criteria <ul style="list-style-type: none"> Remote electrical neuromodulation (REN [e.g. Nerivio]) for the prevention of migraine may be considered medically necessary in individuals when the following criteria are met: <ul style="list-style-type: none"> Individual is 8-17 years of age; AND Headaches meet the International Classification of Headache Disorders (ICHD-3) diagnostic criteria for migraine with or without aura; AND The REN device will be used in the following clinical scenario: <ul style="list-style-type: none"> For the prevention of migraine in individuals with 6 to 24 headache days (defined as a calendar day with headache regardless of severity or duration) per 28-day period in each of the 3 months preceding use of the REN device).
Effective date – 3/1/2026	<p>ID: MCG Guideline: BKC-A-0431 – Initial</p> <p>ID: MCG Guideline: BKC-A-0431 – Continued Coverage</p> <p>Title: Continuous Positive Airway Pressure (CPAP) Device – MCG Informational Update</p>

- MCG Guideline BKC-A-0431 will now be divided into two guidelines to improve clarity, reduce unnecessary pended cases and streamline provider and end-user reviews.
- BKC-A-0431 – Initial will represent initial CPAP DME rental requests.
- BKC-A-0431 – Continued Coverage will represent ongoing/continued CPAP DME rental requests.
- The separation of guidelines is intended to support clearer decision pathways and reduce confusion during utilization review.
- The Auto Authorization rule will be updated to reflect E0601RR using 3 units for the initial 3-month rental and E0601RR using 10 units for the 10-month continued coverage rental. The RR modifier is for "Rental", and if the modifier is not used, the auth will pend.

Pharmacy Policy Updates

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Below are Blue KC pharmacy policies with updates effective **March 1, 2026**, for medications that already require prior authorization:

Pharmacy Policies with Updates		
Policy Number	Policy Name	Summary
5.02.588	Monjuvi (Tafasitamab)	Added FDA indication for follicular lymphoma
5.02.547	Besponsa (Inotuzumab Ozogamicin Injection)	Updated approved age range down to ≥ 1 year of age

Payment Policy Updates

To find the complete version of Blue KC Payment Policies, click [here](#) or go to the login page at Providers.BlueKC.com and click on “Go to Payment Policies”, which lists All Provider Payment and Coding Policies and Lab Payment Policies.

Payment Policies Featured in this Section
Revenue Codes Requiring HCPCS Codes
Billing of Applied Behavior Analysis with Speech, Occupational and/or Physical Therapy IOP, PHP, and Inpatient treatment Services for Substance Abuse and Psychiatric

Revenue Codes Requiring HCPCS Codes Payment Policy

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Policy Number	Policy Name	Effective Date for Updates	Enforcement Date for Updates	Full Policy Location
POL-PP-229	Revenue Codes Requiring HCPCS Codes Payment Policy	4/1/2026	4/1/2026	View our Revenue Codes Requiring HCPCS Codes Payment Policy Visit our Payment Policies page Go to Providers.BlueKC.com , click on “Go to Payment Policies”

Updates Added

- This update, which was announced in the [January 2026 BlueSpeak Provider Newsletter](#), does not apply to inpatient claims and will be **effective for dates of service on or after April 1, 2026**.
- Revenue code and procedure code combinations that are submitted on outpatient claims should reflect the services that were provided to the member on that date of service.

- These codes should be submitted on the same line for accurate claims processing.
- If more than one HCPCS or CPT code is needed for a revenue code, the revenue code should also appear on a separate line.
- Billing and Coding Revenue code(s) and corresponding procedure code(s) must be compatible.
- Blue KC may deny an outpatient facility claim if a revenue code is submitted without the appropriate procedure code(s) when submitted on the following bill types:
 - 12x 13x, 14x, 74x, 75x, 76x, 83x, 84x, 85x, and 89x
 - These are procedure and revenue code combinations that are not appropriate when billed together.
- Evaluation and Management services codes 99202-99249, G0380-G0184 and G2212 when submitted with revenue codes 0760, 0761 and 0769 (specialty services) will be denied.

Policy Number	Policy Name	Effective Date for Updates	Enforcement Date for Updates	Full Policy Location
POL-PP-229	Revenue Codes Requiring HCPCS Codes Payment Policy	4/1/2026	4/1/2026	View our Revenue Codes Requiring HCPCS Codes Payment Policy Visit our Payment Policies page Go to Providers.BlueKC.com , click on “Go to Payment Policies”

Updates Added

- As announced in the [January 2026 BlueSpeak Provider Newsletter](#), the following guidelines will be enforced for Revenue code 0710 Recovery Room, **effective for dates of service on or after April 1, 2026**:
 - Revenue code 0710 requires a CPT/HCPCS code to be submitted in addition to the revenue code. When a CPT/HCPCS code is not submitted with revenue code 0710, it will be returned to the facility due to incomplete or incorrect data.
 - The typical average time spent in recovery is 1 to 3 hours. Recovery room time submitted with over 300 units (5 hours) will be denied for review. Documentation will be required to support the patient was unstable/experiencing complications and the additional time was

medically necessary.

Billing of Applied Behavior Analysis with Speech, Occupational and/or Physical Therapy Payment Policy

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Policy Number	Policy Name	Effective Date for New Policy	Enforcement Date for New Policy	Full Policy Location
POL-PP-329	Billing of Applied Behavior Analysis with Speech, Occupational and/or Physical Therapy	4/1/2026	4/1/2026	View our Billing of Applied Behavior Analysis with Speech, Occupational and/or Physical Therapy Payment Policy Visit our Payment Policies page Go to Providers.BlueKC.com , click on “Go to Payment Policies”

New Policy Summary

- Below is a summary for new Blue KC Payment Policy, Billing of Applied Behavior Analysis with Speech, Occupational and/or Physical Therapy, that will be **effective for dates of service on or after April 1, 2026**. This new policy was announced in the [January BlueSpeak Provider Newsletter](#).
- Concurrent care exists where more than one healthcare provider renders services during a period of time.
 - When Concurrent or Overlapping Billing is Allowed:
 - The following procedure codes, 97153 and 97155, may overlap, as long as the descriptors of each code have been met and different qualified health providers (QHPs) deliver the service.
 - A single provider may NOT bill these codes concurrently.

Modifier	Description
HM	Modifier HM indicates that a service was performed by a provider with less than a bachelor's degree. This modifier is most often used in the billing of behavioral health services, including Registered Behavior Technician
HO	Modifier HO Indicates a master's-level professional, such as a Board-Certified Behavior Analyst (BCBA) or licensed mental health provider

- When Concurrent or Overlapping Billing is Not Allowed:
 - Billing applied behavior analysis (ABA) services when performed in the same block of time as speech, occupational and/or physical therapy, are not allowed.
 - Billing standards require only one service and one provider to be designated for a given time. For example:
 - If a member receives ABA therapy with a registered behavior technician (RBT) and occupational therapy with an occupational therapist from noon to 1 p.m., this is considered overlapping time and is not allowed.
 - If the member receives ABA therapy with an RBT from noon to 1 p.m. and occupational therapy from an occupational therapist from 1 p.m. to 2 p.m., these are not overlapping, and both services are billable. The billing of these services on the same day as ABA is allowed, but not during the same given time.

IOP, PHP, and Inpatient treatment Services for Substance Abuse and Psychiatric Payment Policy

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Policy Number	Policy Name	Effective Date for Updates	Enforcement Date for Updates	Full Policy Location
POL-PP-238	IOP, PHP, and Inpatient treatment Services for	4/1/2026	4/1/2026	View our IOP, PHP, and Inpatient treatment Services for Substance Abuse and Psychiatric Payment Policy Visit our Payment Policies page



	Substance Abuse and Psychiatric			Go to Providers.BlueKC.com , click on “Go to Payment Policies”
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Updates Added

- As announced in the [January 2026 BlueSpeak Provider Newsletter](#) and **effective for dates of service on or after April 1, 2026**, the following condition codes will be required:
 - Partial Hospitalization claims will be required to use condition code 41 indicating Partial Hospitalization Program (PHP).
 - Intensive outpatient claims will be required to use condition code 92 indicating Intensive Outpatient Program (IOP) services.

Prior Authorization Updates

Code Additions

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The following code will be added to our prior authorization list, effective **April 1, 2026**:

Code	Description	Effective Date	Lines of Business Impacted
81303	MECP2 (methyl CpG binding protein 2) (e.g., Rett syndrome) gene analysis; known familial variant	4/1/2026	Commercial, ACA

Provider Education

New Blue KC Provider Reference Guide Now Available

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New Blue KC Provider Reference Guide	<ul style="list-style-type: none"> The new and enhanced Provider Reference Guide (PRG) can be found by logging into Providers.BlueKC.com and clicking on Resources. Multiple documents have been consolidated into a single primary PRG with a supporting BlueCard manual and Federal Employee Program (FEP) manual, which can also be found on the Resources page. Various policies and procedures have been updated and/or revised. The Blue KC Provider Reference Guide includes information about administrative areas, including policies, programs, quality standards, appeals, and more.
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March Lunch-and-Learn

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Blue KC is hosting a Lunch-and-Learn aimed at supporting providers' work addressing health-related social needs. Please register for the Zoom event at the link below.

<https://bluekc.zoom.us/meeting/register/FfbsvyjCTuSFLh90EDLrwA>

After registering, you will receive a confirmation email containing information about joining the meeting.

Date:	Wednesday, March 11, 2026; 12:00 – 12:30 PM Central Time
Title:	Project Connect: Connecting You to the Care You Need
Presenter:	Tara Dull, Chief Compliance Officer, Golden Valley Memorial Hospital, Clinton, MO

Description:	Tara Dull, Chief Compliance Officer at Golden Valley Memorial Hospital in Clinton, Missouri, will discuss “Project Connect”, an event they hosted in the fall of 2025 in their community to bring vital resources and services directly to individuals and families who need them most and address the health-related social needs of their patients. Tara will also share information about ToRCHLink, an initiative to link hospitals, clinics, and community organizations to transform health in rural Missouri. Golden Valley Memorial Hospital and their Primary Care locations and PCPs are participants in Blue KC’s Primary Care First program.
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Virtual Spring Forum

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All are invited to the Blue KC Value-Based Programs Virtual Spring Forum. Register in advance for this meeting: <https://bluekc.zoom.us/meeting/register/14gTddfUT7mX-lfRmWttjQ>

After registering, you will receive a confirmation email containing information about joining the meeting.

Date	Tuesday March 31, 2026; 12:00 – 1:00 pm (Central Standard Time)
Title	<i>Targeting Social Determinants of Health Interventions for the Greatest Impact</i>
Presenter	Trenor Williams, MD, CEO and Co-Founder of Socially Determined
Description	<ul style="list-style-type: none"> • There is strong evidence linking the impact of food insecurity, transportation challenges, housing barriers and other social risks on clinical and broader patient outcomes. • Historically, one of the primary challenges has been getting patient level insights and matching those patients with interventions or programs to mitigate their risks and improve outcomes. • Dr. Williams will discuss real examples from across the country while providing background on Socially Determined and the data that can be shared with Primary Care Providers and their practices. He will cover the

importance of screening, the integration of additional social risk insights and what to do with data to support your patients.

March Free Documentation & Coding Webinar

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Join us for the March monthly webinar hosted by our partner, Veradigm! This is a free documentation and coding education webinar. Each 1-hour webinar is approved for one AAPC CEU when you achieve a 70% or higher on the post-test. To register for the webinar, click [here](#) for details:

March 24 & 26 7:30 a.m. & 11:30 a.m. CT	Cast Away Confusion: Orthopedic Coding Made Simple	Walk with us through the requirements of coding and documenting for orthopedic conditions including Fractures, Spinal Fusion, Pain Management, related surgical interventions, and other associated conditions.
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Contact Us

Please join the BlueSpeak email distribution list by sending a request to BlueSpeak@BlueKC.com. You can also use this email address to give us any feedback about BlueSpeak. We would love to hear from you!

If you have questions about any of these updates, please call the Blue KC Provider Hotline at [816-395-3929](tel:816-395-3929) for Commercial line of business or [866-859-3822](tel:866-859-3822) for the ACA Provider Hotline. We value and appreciate you as our partner in providing quality care.