

## 2025 Annual Provider Notice

Please take a moment to review our 2025 Annual Provider Notice, which contains important updates to our policies and processes. These updates can help improve how we work together and how you support our members. Highlights include:

- Helping your patients get the most out of their coverage
  - Locating our members' rights and responsibilities statement
  - Our case management process, including eligibility criteria and how to refer your patients
- Understanding our utilization review process
  - How to get a copy of our utilization management criteria
  - Discussing a medical necessity denial with a Plan physician or pharmacist
- How we're ensuring access for our members and tackling rising healthcare costs
  - Our standards for appointment access and provider availability
  - Reporting suspected fraud, waste and abuse to our Payment Integrity Department

[View Annual Notice](#)

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## Medical Policy Updates

On September 1, 2025, new medical policy updates go into effect. The updates include reinstating prior approval for non-urgent ambulance and medical transport services. Please note that non-urgent ambulance services are generally not covered and will not be paid for unless medically necessary, regardless of the need for prior approval.

Review our notice for more details on this and all upcoming changes.

[Medical Policy Updates](#)

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## Pharmacy Updates

- **Stelara (ustekinumab) will be excluded** on the National Performance Formulary (NPF) and BCBSVT formulary starting July 1, 2025.
  - Yesintek, an interchangeable biosimilar to Stelara, is another option and is a preferred Tier 1 drug. It is already on the formulary, along with another biosimilar, Wezlana. Both do not require prior authorization at this time, have the same tier, and have coupon cards that can be applied.
  - These medications are biologics used for inflammatory conditions such as plaque psoriasis, psoriatic arthritis, Crohn's disease, and ulcerative colitis. Studies indicate they have comparable safety and effectiveness to Stelara.

- **Quantity limits have been removed** for buprenorphine tabs, buprenorphine/naloxone films, and Zubsolv. This assists patients and prescribers with providing individualized care and dosing plans, as these are commonly used for the indication of opioid use disorder (or medication assisted therapy, MAT).
- **Other formulary changes occur on July 1, 2025**, and have been provided in letters to providers and prior e-newsletters. View our [Covered Medications webpage](#) for the current formulary.

**Questions?** Reach out to our Clinical Pharmacist, Amy Stoll, PharmD at [stolla@bcbsvt.com](mailto:stolla@bcbsvt.com) or 802-371-3657 to discuss drug coverage or clinical questions.

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## Act 111 Prior Authorizations Reminder

Prior authorizations are not required for Blue Cross VT members (including New England Health Plan/Access Blue New England members who have selected a Vermont primary care provider) when the following criteria applies:

- The ordering provider is a Blueprint Primary Care Provider who is in the Blue Cross VT network.
- The member is eligible for prior authorization waiver under Act 111.

If these two requirements are met, prior authorization is waived, and you do not need to submit a request. If you submit a request for prior authorization, you will receive a letter indicating no prior authorization is required and no prior authorization will be given.

For an eligible claim to bypass prior authorization requirements, the claim must be billed correctly. The billing provider or facility must submit the claim for the service identifying the ordering Blueprint provider. Claim submission details are located in our [Provider Handbook](#), in Section 12: Act 111 – Blueprint Primary Care Provider Waiver of Prior Authorization.

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## Provider Satisfaction Survey

We're interested in your experience working with us. Our research partner, Press Ganey, is sending a provider satisfaction survey to a random sample of Blue Cross VT providers. The survey takes less than ten minutes to complete and will help us improve the plan experience for you and our members. The first 200 respondents will be entered into a raffle to win a \$200 gift card to the supermarket of their choice.

Thank you for sharing your feedback and for helping us make health care work better for Vermonters.

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## Third Quarter CAA Directory Validation

- Third Quarter Consolidated Appropriations Act (CAA) directory validations will be released on or around July 5, 2025.
- **You must complete the directory validation by Tuesday, August 5, 2025**, or you will be removed from our provider directory and risk possible contract termination.
- Be on the lookout for an email from [noreply@onbaseonline.com](mailto:noreply@onbaseonline.com).
  - If you receive more than one email, please respond to all emails received. Some providers have multiple provider files and multiple

verification needs to occur.

- If your practice was removed from the network directory due to non-response of the second quarter validation, this is your opportunity to be added back in.

Details about the CAA Directory Validation and instructions to complete the process are located on our [Enrollment and Credentialing webpage](#), under the “CAA Directory Validation” section. If you have questions, please call (888) 449-0443, option 2, or email [CAA@bcbsvt.com](mailto:CAA@bcbsvt.com).

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## New In-Network Independent Laboratory

On June 1, 2025, Billion to One, Inc., a genetic testing laboratory, was added to our network of independent laboratories.

**Reminder:** Blue Cross VT providers must use in-network laboratories. In-network facilities that offer lab services can also be used.

[View the list of in-network independent laboratories.](#)

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## 2024 QHP Risk Adjustment Data Validation Project

We have partnered with Reveleer again this year for the medical record retrieval of 2024 claims identified in the Risk Adjustment Data Validation (RADV) project by the Centers for Medicare & Medicaid Services (CMS). Outreach typically begins in July. If you receive a request from Reveleer, please respond promptly following the instructions provided.

If you have any questions on the RADV project, contact our Qualified Health Plan (QHP) Risk Adjustment Department by email at [RiskAdjustment@bcbsvt.com](mailto:RiskAdjustment@bcbsvt.com) or phone at (802) 371-3540.

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## Preventive Care Guide Updates

The preventive care guide has been updated with an additional code in the Hepatitis B section. The change goes into effect September 1, 2025.

[Preventive Guide Updates](#)

## Holiday Closure

We will be closed on Friday, July 4, 2025, for Independence Day. We will reopen for normal business hours on Monday, July 7, 2025.

### July 4, 2025 EFT Reminder

Due to the holiday on Friday, July 4, 2025, the weekly Electronic Fund Transfer (EFT) will occur on Monday, July 7, 2025.

Blue Cross and Blue Shield of Vermont, 445 Industrial Lane, Berlin, Vermont 05602, USA

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