NOTICE OF PAYMENT POLICY CHANGES

Date: August 1, 2025



The chart(s) below provide a high-level overview of new/revised/archived Payment Policies. We encourage you to review the payment policies in their entirety. Updated and new payment policies are posted at https://www.bluecrossvt.org/provider-policies

60-Day Advanced Notice Policy Changes

Policy Name: CPP_32 Claims Editing

Policy Type: Payment Policy

Summary:	 Removed Specialty Review Panel Content from all edits that had this component. Clarified and/or added verbiage to the following Cotiviti Edits: Clarified the Co-surgeon edit by adding Outpatient Facility Claims submitted on a UB-04 as a claim type. Added verbiage regarding Split Surgical Care edit. Added verbiage regarding the Modifier edit. Clarified source in Place of Service edit to CMS only. Clarified source in Duplicate Services edit by adding CMS.
	Added verbiage to define Multiple Procedure Reduction for Radiology edit.
Effective Date:	October 01, 2025
Link to Policy/ Manual:	https://www.bluecrossvt.org/documents/cpp32-claims-editing-payment-policy- oct-2025

Policy Name: CPP_38 Outpatient Therapy Services (Occupational & Physical)

Maximum Timed Units Limit per Session

Policy Type: Payment Policy

Summary:	Clarified policy statement regarding definition of therapy session to include: Occupational & Physical Therapy Session is Defined: • An OT/PT session is defined as up to (4) units of OT/PT services (including treatment and/or evaluation). • Billing cannot exceed (4) units per session. • If an evaluation or re-evaluation is performed it cannot exceed (1) unit, therefore there are no benefits for more than (3) additional timed units performed at the same session.
Effective Date:	October 01, 2025
Link to Policy/ Manual:	https://www.bluecrossvt.org/documents/cpp38-outpatient-therapy-services-policy-oct-2025

Revisions to Current Policies

Policy Name: CPP_21 Inpatient Hospital Readmission

Policy Type: Payment Policy

Summary:	Removed language surrounding the procedure on how to submit a request for reconsideration under the Readmission Within Five (5) Calendar Days of Discharge section of the payment policy. Replaced language with the following guidance: The process for filing a reconsideration for an inpatient hospital resubmission is located on our Provider Policies website page. The policy intent remains unchanged and offers additional clarification regarding the process.
Effective Date:	August 01, 2025
Link to Policy/	https://www.bluecrossvt.org/documents/cpp21-inpatient-hospital-
Manual:	readmission-august-2025

Notice of Right to Object in Writing

In accordance with 18 V.S.A. § 9418c contracted providers have the right to object to new or modified policies and manuals.

Providers who object must do so within 60 days of the date the notice related to a policy or manual change. The rationale for the objection to the change must be in writing including related area(s) of the policy or manual and rationale or reasoning for the objection.

These objections are to be directed to Provider Contracting. This can be done by email at: providercontracting@bcbsvt.com or US Postal Service BCBSVT Attn: Provider Contracting, PO Box 186, Montpelier, VT 05601.

Within 5 business days of receipt, the sender will receive confirmation of receipt of the objection.