

NOTICE OF PROVIDER HANDBOOK CHANGES

Date: October 1, 2026



BlueCross BlueShield
of Vermont

An Independent Licensee of the Blue Cross and Blue Shield Association.



bluecrossvt.org

The Provider Handbook has been updated with the following:

Summary:	Section 6.1 General Claim Information
Explanation:	Added the following due to new payment policy: Inpatient Hospital – Services Incidental to Inpatient Admission (3 Day) We have a Payment Policy CPP_54 for Services Incidental to Inpatient Admission. The policy is located on our provider website under Provider Policies, Provider Payment Policies.
Effective Date:	December 1, 2026
Link to Policy/ Manual:	www.bluecrossvt.org/documents/provider-handbook

Summary:	Section 6.1 General Claim Information
Explanation:	The following requirement under the Observation Services has been removed: BlueCard claims only: Observations stays that convert into an inpatient admission/stay must have services billed on two separate claims; one claim for the observation services and one claim for the inpatient admission/stay. - If a combined claim is received for the observation and inpatient admission/stay, the claim will be denied on the provider voucher with a CO152 denial: “we cannot process this claim because the number of days between the first and last date of service do not equal the number of units on the room and board line for the type of bill.” - Separate claims for each service must be submitted for the processing to continue.
Effective Date:	December 1, 2026
Link to Policy/ Manual:	www.bluecrossvt.org/documents/provider-handbook

Summary:	Section 6.7F Dental Care		
Explanation:	The below is being removed from Eligible Services and Contracts Vermont Blue Advantage There are two different benefits for members for dental services: the traditional services covered under Medicare and enhanced benefits available through a Medicare Advantage plan such as Vermont Blue Advantage. Traditional Medicare Dental Benefits <table border="1" style="width: 100%;"> <tr> <td style="width: 50%;">Contract/Network Required</td><td style="width: 50%;">Blue Cross and Blue Shield of Vermont contract that includes a Medicare Advantage Addendum (888) 449-0443 option 2</td></tr> </table> Enhanced Dental Benefit	Contract/Network Required	Blue Cross and Blue Shield of Vermont contract that includes a Medicare Advantage Addendum (888) 449-0443 option 2
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	Eligible services include but may not be limited to cleanings, fillings, root canals, etc. Please contact DentaQuest for full details. For these benefits:	
	Contract/Network Required	United Concordia (877) 438-8224 go through prompts as a provider then ask to speak with Provider Relations (no direct line to this area)
Effective Date:	N/A VBA is not selling products	
Link to Policy/ Manual:	www.bluecrossvt.org/documents/provider-handbook	

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.