



January 13, 2022

For Truli for Health and Florida Blue Providers

ADMINISTRATIVE NEWS

Availity Messages for Authorizations and Referrals Provide Context for Current Status

Florida Blue recently added messaging in the Service Information section of Availity®. You now will receive additional information for an authorization or referral request, including the reason it was pended, voided/cancelled or denied. More details will be added to messages throughout the first quarter of 2022. [Learn more>>](#)

QUALITY / HEDIS / CAHPS

Coding Newsletter Focuses on Annual Wellness Visits

Our January issue of Closing Gaps and Meeting Metrics highlights coding tips for Annual Wellness Visits, including documentation requirements. [Learn more>>](#)

For Florida Blue Providers Only

BILLING AND CODING

Important Change for Billing Behavioral Health Evaluation and Management Services

Effective immediately, please discontinue using procedure code 99417 and use HCPCS code G2212 only to bill for prolonged behavioral health services. [Learn more>>](#)

HEALTH CARE PLANS (MEDICARE ADVANTAGE)

CMS Conducts National Audit on Improper Payments

The Centers for Medicare & Medicaid Services (CMS) will be performing a Part C Improper Payment Measure audit related to our BlueMedicareSM RPPO and BlueMedicare (Medicare Advantage) members' information for the 2019 benefit year. [Learn more>>](#)