



**Breaking boundaries:
Enhancing healthcare
access with BlueCard
modernization.**

Democratizing easy access to healthcare has long remained an agenda topper for healthcare regulatory bodies across the globe. When the Blue Cross Blue Shield Association (BCBSA) launched the BlueCard program in 1996, it aimed to provide members with access to healthcare services while they were traveling or living outside their home state.

The BlueCard program allows members to receive healthcare services from participating healthcare providers across the country, using their local BCBS plan's network and coverage benefits. In the US alone, BCBS companies offer coverage for up to [114 million people](#), which is one in every three Americans, across various healthcare plans. However, in recent times, the BCBSA has identified the need for a significant overhaul of its technology infrastructure and processes, and this can be attributed to:

- **The pandemic:** Post the COVID-19 mobilization freeze, citizens have spread out more than ever and are increasingly working remotely. This shift in the work environment has presented a unique challenge to improve efficiency in providing accessible and cost-effective healthcare services to these individuals.
- **Adapt and thrive:** With emerging technologies like scalable cloud infrastructure and advanced analytics, along with CMS advocating for standardization, a digital transformation was long overdue.
- **Competition:** To maintain a competitive advantage over larger national plans, BCBSA understands they need to be on top of attributes such as geographic reach, market consolidation, product offerings, and technological advancements.

Driven by these factors and clubbed with the ever-present need to provide more efficient and improved care delivery at lower costs, the BlueCard Modernization (BCM) program was initiated.

Key areas of change

The BlueCard Modernization program encompasses several workstreams to transform and streamline healthcare services across the BCBS network. Pivoted on elevated customer experience, this initiative is intended to empower consumers with [“secure, meaningful, and actionable information about their care and expected costs.”](#) Here are some of the key tenets of this modernization drive:

Portals and platform: Online portals and self-service platforms will get a massive overhaul to ensure real-time access to member eligibility verification, claims status, and other relevant information. The revamped platform will provide the flexibility to Home/Host plans to push/pull various types of data.

Clinical data exchange: From a data ecosystem perspective, there will be improved interoperability and data exchange capabilities to facilitate the sharing of clinical data between Home and Host plans and healthcare providers. Capabilities will expand to include out-of-state data elements, including EHR, SDOH, etc., leading to decreased chart chase and improved population health management.

Provider data transformation: A cloud-based modernized provider data foundation leveraging industry standard FHIR API's will improve data accuracy & accessibility. BCM program will also employ enhancements to out-of-state provider data management, including better data quality checks, validation, and synchronization across BCBS plans.

ITS modernization: The ITS (Inter-plan Teleprocessing System) is currently based on a legacy mainframe system. The BlueCard Modernization program will move the system to a new,

cloud-based platform. This will make the system more scalable and reliable, and it will also make it easier to implement new features and functionality. BCM will introduce new APIs allowing BCBS plans to integrate the ITS system with Blue plans ecosystem for improved claims routing, authorization processing, and payment reconciliation.

Advanced account reporting: In order to improve the flexibility and granularity of data received by home plans, BCM will enhance reporting capabilities at member as well as provider level encapsulating data elements like clinical, quality, and cost. Increased accessibility into out-of-area KPI's like claims data, utilization patterns, medical costs, and Provider performance, plans can compute financial metrics and drive meaningful insights.

Real-time messaging: To reduce administrative burden & improve efficiency in communication between BCBS plans, providers, and members, BCM will focus on real-time messaging capabilities through improved alerts and notifications for claim status updates, prior authorization requests, inter-plan inquiries etc.

What should participating plans do?

As a result of these changes, health plans will need to be thorough in terms of identifying the impact on their organization. They can analyze the impact and define strategies to address respective changes across people, processes, and technology.



People: Everything great happens for and through people; health plans should deliberate about that aspect of the change. It will mean thorough training for their staff on the updated processes, system changes, and new operating models as part of the BlueCard Modernization program. Major overhauls like BCM need a constant push toward adoption by all stakeholders. Consecutively, there should be alignment across executive leadership, grooming of champions, and collaboration with other BCBS plans.

Process: A program of this scale can trigger significant process changes, especially in areas like prior authorization, claims submission, processing, adjudication, provider directory updates, and payment procedures. Enhancing processes for nurses and other staff members to manage the breadth of clinical data for out-of-state members will ensure greater productivity and efficiency in clinical

operations. With more focus on improved member engagement, the customer service team will need to deal with a significantly diverse and large number of stakeholders. It will be important to create strong processes and communication protocols for smooth interactions. Overall, maintaining updated process documents and SOPs consistent across plans will be critical to the program's successful implementation.

Technology: Healthcare plans must invest in technology upgrades to implement scalable systems and platforms for supporting various BlueCard modernization capabilities. As part of the clinical data exchange workstream, plans must thoroughly account for all data domains like admission/discharge, continuity care, labs, pharmacy, and social determinants of health (SDOH). It is important to realize this program as an opportunity to rationalize interoperability standards and versions (FHIR, HL7, CCD) across plans. While clinical data integration is not a new concept to health plans, the enhanced scale of data ingestion, cleansing, and transformation required will present a unique challenge to host plans. Potential SDOH vendor onboarding and data management impacts also remain a consideration while detailed requirements for subsequent phases are announced.

Real-time collaboration between home, host plans, and providers is one of the key initiatives within BCM, which needs to be made more efficient through automated chatbots and conversational AI to improve efficiency and cost. Transforming reporting systems and focusing on advanced analytics around provider performance will provide key insights that can help enhance the quality of care and manage value-based network and specialty care providers.

Lastly, it is important to stay engaged with partners, peers, and vendors who have expertise in tech modernization journeys of such scale.

Broadening healthcare access

The future of cross-state healthcare coverage looks promising, and it will deliver a new level of care and connectivity for members and providers alike. With BCM, members can expect a more seamless experience of care delivery from providers in different states, with reduced administrative barriers and improved coordination of care. BCM can generate significant cost savings for health plans with streamlined administrative processes, reduced claim denials, and improved data accuracy.

Improved financial performance will enable plans to invest resources in innovative healthcare initiatives. As a result of seamless, high-quality healthcare experience across state lines, Blue plans can strengthen their value proposition to employers, purchasers, and members. As BCM unfolds, plans will likely focus on increasing clinical data capture percentages for home and out-of-state members. Tech-enabled predictive analytics on travel patterns and SDOH will likely continue to be the focus in order to achieve improved care management and population health management. BCM is a step in the right direction to not only maintain a competitive advantage but it will also have a positive spill-over effect on the rest of the healthcare industry.

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