



# Special Needs Plan Model of Care training deadline Jan. 31

If you are in our VIP Prime Network, you must complete our <u>Special Needs Plan (SNP)</u> <u>Model of Care (MOC)</u> training by Jan. 31. Find required training on our website. You must also complete <u>Archcare's SNP MOC</u> annual training.

# 2018 plan news & regulatory reminders mailing – now available online

We encourage you to review and share this <u>comprehensive summary</u> of updates and requirements with your clinicians and staff. See our 2019 suite of networks and benefit plans, access to care standards, quick guides, and more in one easy-to-access document.

Make sure your staff knows which of our networks you participate in for 2019. Watch this **video** if you need help finding your participation.

### Annual wellness visit - calendar year vs. medical benefit plan year

Large Group and Small Group commercial plan members are eligible for an annual wellness visit once every benefit plan year. This means they can get one visit in 2019 without waiting for 365 days to pass. In contrast, individual commercial plan members are eligible for an annual wellness visit once every calendar year but it must be 365 days from the last visit.

# Weight & obesity management - body mass index (BMI) makes a difference!

According to the National Institutes of Health (NIH), Assessment (body mass index (BMI), waist circumference, and overall medical risk or comorbidities) and Management (weight loss and prevention of weight gain) are the two steps health care professionals should incorporate into their treatment of obese patients. More

# **EmblemHealth expands Medicare VIP Prime Network to Hudson Valley**

<u>EmblemHealth's Medicare VIP Prime Network plans</u>, including our new <u>Affinity plans</u>, are now available to members in the following Hudson Valley counties: Dutchess, Orange, Putnam, Rockland, Sullivan, Ulster, and Westchester.

#### **CLAIMS CORNER**

#### CODING

# EmblemHealth preventive care/screening services coverage (Revised)

EmblemHealth covers the following services in accordance with CMS Guidelines and requirements under the Affordable Care Act: HCPCS codes G0442, G0443, G0444, G0445, G0446 and G0447. In order to be reimbursed as a separately identifiable preventive service, Modifier 25 or Modifier 59 must be appended to HCPCS codes G0442 - G0447 when reported with an unrelated Evaluation and Management (E/M) service, in accordance with National Correct Coding Initiatives (NCCI) policies.

- Claims with Modifiers -25 or -59 for the above services are allowed retroactively to 07/15/2016.
- Starting on 11/12/18, claims with Modifier 59 are being processed prospectively.
- All affected claims will be reprocessed. You do not need to resubmit these claims.
  (More)

### Importance of correct NPIs

Using an incorrect National Provider Identifier (NPI), or billing with a missing NPI, can result in an incorrect claims payment or denied claims. NPIs are needed for all clinicians on the claim. Federal law mandates that health care practitioners use their unique, 10-digit NPI when submitting standard electronic health care transactions, such as claims. Sign in to your provider profile on <a href="mailto:emblemhealth.com">emblemhealth.com</a> to make sure you have the right NPI on file.

# Medicare coverage change for gene expression profiling – coronary artery disease

Effective March 18, 2019, gene expression profiling – coronary artery disease (CPT Code 81493) will no longer be covered for our Medicare members. Claims will be denied as Experimental and/or Investigational. (More)

#### **UTILIZATION REVIEW**

## Consolidated prior approval/preauthorization list now available

This is a <u>complete list</u> of all services requiring a prior approval for HIP members or a precertification for GHI members (jointly referred to as "preauthorization") subject to their benefit plan's coverage for all places of service, including Office (POS 11). The list accounts for EmblemHealth's medical policies, medical technology database, provider manual, and special utilization management programs. Preauthorization is not a guarantee of payment. Payment is subject to a member's eligibility for benefits on the date of service. Emergency services do not require a preauthorization.

#### **PHARMACY**

## Reminders starting Jan. 1, 2019

EmblemHealth is managing injectable drug utilization. To submit a prior approval request, fax it to: **877-243-4812**, or call: **888-447-0295**.

Accredo is EmblemHealth's new specialty pharmacy. To order medications, contact Accredo using <u>accredo.com</u>; or call them at: **855-216-2166**.

### Stelara moving to pharmacy benefit for commercial members

Starting **April 1, 2019**, the self-injectable drug, Stelara will move from a medical benefit to a pharmacy benefit for our commercial members. Our new preferred specialty pharmacy, Accredo will contact members to determine where to send the drug — directly to the member for self-injection or to their doctor's office on their behalf. Stelara infusion will stay covered under the medical benefit.

## Primatene Mist (epinephrine) will return to OTC

Primatene Mist (epinephrine) will return to over-the-counter (OTC) shelves in its new HFA formulation indicated for relieving mild-to-moderate symptoms of intermittent asthma in patients age 12 and up. While proponents say the OTC status gives asthma patients easier access to quick relief, it's important to remember that Primatene Mist is not a replacement for prescription asthma treatments. Primatene Mist HFA only treats asthma symptoms. Treating symptoms alone can lead to more attacks and permanent lung damage. Additionally, use of drugs like Primatene Mist has been associated with decreased use of inhaled steroids and under-utilization of physician services. Primatene Mist HFA is shorter acting than Albuterol and costs more than Albuterol inhalers on the market today. Primatene Mist HFA is not beta selective like Albuterol and can cause side effects such as increased blood pressure and heart rate, which may not be appropriate in many patients with comorbid conditions. Remind your patients that asthma is a serious medical condition they should address with their health care team to ensure an appropriate treatment plan.

## **Formulary Updates**

- Commercial-Healthcare Exchange
- Medicare

- Medicaid
- Summary of 2019 Formulary Updates

# **New Pharmacy Guidelines**

- 1. Azedra (lobenguane I-131)
- 2. Colony Stimulating Factors: Udenyca (pegfilgrastim-cbqv)
- 3. Crysvita (burosumab-twza)
- 4. Ilumya (tildrakizumab-asmn)
- 5. Krystexxa (pegloticase)
- 6. Kyprolis (carfilzomib)
- 7. Mepsevii (vestronidase alfa-vjbk)
- 8. Mvasi (bevacizumab-awwb)
- 9. Onpattro (patisiran)
- 10. Poteligeo (mogamulizumab-kpkc)
- 11. Radicava (Edaravone)
- 12. Rituxan Hycela (rituximab and hyaluronidase Human)
- 13. Tremfya (guselkumab)
- 14. Velcade (bortezomib)

#### **MEDICAL POLICY UPDATES**

#### **NEW**

<u>Dental Care or Treatment Necessary Due to Congenital Disease or Anomaly — New</u> York

**Dental Trauma Guidelines for Medical Plans** 

**Glaucoma Surgery** - Added Hydrus Microstent coverage.

Anesthesia for Dental Procedures and Oral and Maxillofacial Surgery — New York

#### REVISED

<u>Vagus Nerve Stimulation for Epilepsy</u> — Lowered eligibility age from 12 to 4.

#### **REMINDERS**

#### Monthly webinar for practitioners and office staff

Webinars are held the second Wednesday of each month; 10 to 11 am and 2 to 3 pm. Our next event is Feb. 13, 2019. Learn about our networks and benefit plans, special utilization management programs and ways to maximize your administrative efficiencies using our web-based tools and resources — perfect for new staff or as a refresher. Space is limited, Register today.

### Tell your patients about their treatment options

Make sure your members know how to access care when you're not around. This <u>flyer</u> can help your patients choose the most appropriate site of care.

#### **Use network labs**

Quest Diagnostics and its affiliate, AmeriPath, are our preferred labs.

To keep costs down for our members, please refer all of your EmblemHealth members to Quest Diagnostics, AmeriPath, or another participating laboratory in accordance with your agreement with us. If you do not have an account, call:

- Quest Diagnostics at **866-697-8378**, and follow the voice prompts.
- AmeriPath at 800-553-6621 for dermatopathology services.
- AmeriPath at 866-436-9631 for hematopathology, cytogenetics, gastroenterology, and urology services.

#### **EmblemHealth**

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EmblemHealth insurance plans are underwritten by Group Health Incorporated (GHI), Health Insurance Plan of Greater New York (HIP) and HIP Insurance Company of New York.

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