Geisinger Health Plan

Provider Update

June 2019

Geisinger appoints Jaewon Ryu, MD, as President and CEO

Geisinger recently announced that its Board of Directors has appointed Jaewon Ryu, M.D., J.D., as president and chief executive officer. Dr. Ryu has served as interim president and CEO since November 2018 and executive vice president and chief medical officer since September 2016. He succeeds David T. Feinberg, M.D., MBA, who left Geisinger earlier this year to assume a leadership role at Google.



Geisinger President and Chief Executive Officer Dr. Jaewon Ryu

"I am honored by this appointment and feel blessed to lead an organization that is making better health easier for our patients, members and communities," Dr. Ryu said. "The country looks to Geisinger as a leader in bringing world-class care and coverage to

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Geisinger Health Plan (GHP) may refer collectively to Geisinger Health Plan, Geisinger Quality Options, Inc., and Geisinger Indemnity Insurance Company, unless otherwise noted.

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everyone we serve. I am incredibly proud of the progress we are driving in expanding our value-based care model. Geisinger has a bright future ahead, and I am committed to building upon our legacy working with our dedicated and talented physicians and staff."

Read the <u>full announcement</u> at www.geisinger.org.

Each service location must be registered with DHS to see GHP Family and GHP Kids patients after July 1, 2019

Applies to: All providers Plan(s): GHP Family and GHP Kids

As of July 1, 2019, the Pennsylvania Department of Human Services (DHS) has fully implemented Affordable Care Act (ACA) provisions that will affect your claims for Medical Assistance (MA) and/or Children's Health Insurance Program (CHIP) enrollees. All facilities, offices, individual providers and other practitioners who render, order, refer or prescribe items or services to MA and/or CHIP enrollees need to be enrolled with DHS with a valid PROMISe ID for each practice location.

As of July 1, 2019, all providers who care for GHP Family (MA) and/or GHP Kids (CHIP) patients must have a valid service-location specific PROMISeTM ID registered with DHS for claims to pay.

It's not too late! If you have not already done so, complete your enrollment today! Visit the DHS enrollment page at https://provider.enrollment.dpw.state.pa.us/ to enroll.

Visit GHP on NaviNet to read the recent Operations Bulletins regarding this change for GHP Family and GHP Kids providers:

- Ops Bulletin about enrollment for GHP Family
- Ops Bulletin about enrollment for GHP Kids

Dual eligible Geisinger Gold Secure Rx members to choose secondary (Medicaid) coverage in 2020

Applies to: All providers Plan(s): Geisinger Gold

Effective January 1, 2020, Geisinger Gold Secure Rx (HMO SNP) members, who are eligible for both Medicare and Medical Assistance (Medicaid), will be required to select a Community Health Choices (CHC) company to administer the Medical Assistance portion only of their health care coverage. The CHC companies in Pennsylvania are UPMC Community Health Choices, PA Health & Wellness (Centene), or AmeriHealth Caritas/Keystone First (AmeriHealth). Secure Rx will continue to provide the member's primary health coverage. Members will not be required to change their Medicare Advantage plan. The CHC plan will provide the administrative services and secondary coverage currently furnished by the Pennsylvania Department of Human Services (DHS). The member will not be required to do anything differently to access Medicare-covered services or use their Secure Rx benefits.

Members questioning this change can be referred to the Geisinger Gold customer service team at (800) 498-9731 (TTY 711) from 8 a.m. to 8 p.m., Monday through Friday.

More information on the Pennsylvania Department of Human Services' CHC program can be found online at <u>http://www.healthchoices.pa.gov/info/about/community/.</u>

GHP to administer Behavioral Health services

Applies to: Behavioral health and other providers Plan(s): All plans except GHP Family

Magellan currently administers behavioral health services for all GHP plans except GHP Family (Medicaid). Beginning Jan. 1, 2020, GHP will assume the administration of behavioral health benefits for members. Evidence supports that this type of integration optimizes member outcomes and controls medical costs. This approach will also allow GHP to have a more holistic view of member health, assist in better outcomes and improve overall satisfaction.

GHP will meet all federal and state network adequacy requirements, ensuring members have access to providers, regardless of location. We will maintain a current database of behavioral health providers so members can identify providers who meet their needs (e.g., location or specialty). To provide our members with continuity of care for their behavioral health needs, Magellan providers will be considered in-network for GHP's behavioral health network.

GHP will no longer use Magellan to manage our Behavioral Health Network as of Jan. 1, 2020. To continue seeing your GHP patients after Jan. 1, 2020, you must have a direct contract and be credentialed with GHP.



The monthly Provider Update is published by Geisinger Health Plan and serves as an informational resource for the provider network. This update and more resources are available on NaviNet.

GHP escalating clinical data sharing efforts to support patient care

Applies to: All providers Plan(s): All plans

GHP supports cooperative data exchanges that benefit you and your patients

GHP is dedicated to advancing the quality of patient care. Establishing a data-sharing relationship with GHP promotes improved care coordination for your GHP patients resulting in better health outcomes. Data-sharing also facilitates timely claim processing, limits denials related to medical record access and insufficient documentation and decreases your administrative burden. GHP provides numerous health data sharing options at no cost to you. We want to work with you to find the most convenient way to share necessary medical record data while minimizing the impact on clinical and support staff at your office.

Talk to your GHP provider account manager about how sharing medical record data with GHP can benefit you and your patients. Contact your account manager at 800-876-5357.

New requirement effective July 1, 2019

As of July 1, 2019, GHP may withhold or recoup payment for claims when requested health records related to those claims are not provided within 60 days of GHP's request.

GHP expects complete and timely access to medical records in support of quality patient care. Visibility of member medical records allows GHP to more effectively coordinate and supplement the patient care you provide. All costs associated with the access or provision of requested member health records, either to the provider or medical record copying company, are considered fully compensated as part of the contracted payment rate(s) expressed in your agreement with GHP.

GHP understands complete access to, or provision of, a member's medical record may not be possible under special circumstances – during certain behavioral health treatments for instance. GHP will abide by all applicable exclusionary regulations and/or laws that prohibit access to member health records.

The Operations Bulletin dated May 28, 2019 is available on the GHP plan central page on NaviNet under Operations Bulletins.

HPV vaccine covered for ages 27-45 with cost-sharing

Applies to: All providers Plan(s): All plans except Geisinger Gold

Human papillomavirus (HPV) vaccine (Gardasil ®9) is covered for males and females ages 9-26 with no cost-sharing. HPV vaccine is also covered for males and females ages 27-45 with cost-sharing. HPV vaccine is not covered for ages 46 and over.

Medicare health outcomes survey — Improving or maintaining physical health

The Medicare Health Outcomes Survey (HOS) is used to gather clinically meaningful data from Medicare Advantage beneficiaries. The survey is used to gauge plan performance, inform Medicare Advantage beneficiaries' healthcare choices and advance research into population health. All managed care organizations with Medicare contracts, including Geisinger Gold, must participate.

Patients are asked about their general physical health, physical functioning and how bodily pain may be affecting their lifestyle. You can help improve and maintain your aging and elderly patients' physical health by doing the following:

- Encourage your patients to increase their overall physical activity. Staying active may be the single greatest factor in maintaining health.
- Regularly evaluate your patient's pain and functional status.
- Provide interventions to improve physical health and pain management. Leverage GHP's disease management, health management, and wellness programs; and consider physical therapy referrals when appropriate.
- Develop goals and action plans for your patients to take an active role in improving their health.

For comprehensive information about the Medicare Health Outcomes Survey program, visit the CMS HOS website at http://hosonline.org.



Include RT/LT modifiers when billing for hearing aids

Applies to: Hearing aid providers Plan(s): All plans

When submitting claims for hearing aids, bill the monaural CPT code with the appropriate RT or LT modifiers. The exception to this rule would be if a binaural CPT code is used. When a binaural CPT code is used, the claim will process to pay as two hearing aids. If the RT/LT modifiers are not included with a monaural CPT code, your claims may not process correctly.

Help your Geisinger Gold patients earn a \$25 gift card while improving your PQS score

Applies to: Primary care providers Plan(s): Geisinger Gold

Your Geisinger Gold patients are now eligible to earn a one-time \$25 Walmart gift card for completing a health risk assessment survey and seeing their doctor for their Annual Wellness Visit (AWV). This incentive program is meant to promote greater patient involvement in their healthcare while maximizing the benefits of their Medicare Advantage benefits. Seeing your Geisinger Gold patients for their AWVs will also improve your PQS score as this is a newly added measure for calendar year 2019.

How the Geisinger Gold patient incentive program works

All eligible Geisinger Gold members will receive a <u>mailer explaining the program</u>. Members can earn the incentive reward by completing the following steps:

- 1. Complete Health Assessment survey. Members can visit GeisingerHealthPlan.com/wellness and sign in or create a new member account to complete survey online. They can also call 866-415-7138, Monday through Friday from 8 a.m. to 5 p.m. to request a paper copy.
- 2. See their doctor for their AWV. Members will need their doctor to fill out the <u>form attached to bottom of mailer</u> they received. In addition to signing your patient's form, it is important that the AWV is scheduled and billed appropriately. Appropriate AWV codes are listed on the form.
- 3. Mail the form back to GHP by December 31, 2019. Once the form is signed by their doctor and filled out in full, members should mail it in the prepaid envelope provided. The form must mail by December 31, 2019.
- 4. After GHP receives form and health assessment conditions are met, a \$25 Walmart gift card will be mailed to member. The one-time \$25 Walmart gift card can be used to purchase items sold at Walmart stores, excluding alcohol, tobacco, and firearms.

Things you need to know

- GHP reimburses the "G" codes on an annual calendar year basis, unlike Medicare which reimburses on a rolling 365day basis.
- Use appropriate modifiers and billing guidelines when performing multiple services on the same date as the AWV.
- The member incentive form does not need to be signed by the physician. Office staff are able to stamp or initial the form to verify that the visit was completed.
- If your Geisinger Gold patient forgets to bring their incentive form to the appointment, you can find and <u>print a copy</u> of the form on NaviNet under *Resources* or on the Provider Forms and Resources page at GeisingerHealthPlan.com. Completed member incentive forms can be mailed (be sure to include the zip code extension) or faxed to:

Geisinger Health Plan – Wellness Department 100 N. Academy Ave. Danville, PA 17822-5002 570-214-7742

CareSite mail order offers unique solutions for GHP members

Applies to: All providers

Plan(s): All plans with CareSite access

If your Geisinger Health Plan members have new or existing prescriptions for 90-day supplies of maintenance medications, there's a good chance they can take advantage of the benefits of mail order!

Savings

- Geisinger Gold Medicare Advantage members can save 50% on the retail cost of their maintenance medications
- Nearly all other GHP members will see savings on their prescriptions (compared to 30-day retail costs)

Convenience

• Medications are shipped to the member's home, eliminating trips to the pharmacy and increasing medication adherence

Security

- High volume automation is 99+% accurate and can fill 2,000 prescriptions in 8 hours
- Medications are shipped in temperature tested packaging
- Members can track their medication shipments
- All prescriptions are processed and shipped from a secure facility in Elysburg.

To get started, members can:

- Call CareSite at 844-878-5562 (TTY: 711),
 6:30 a.m. 5 p.m., Monday Friday. Representatives will review their prescriptions and set up their account.
- Visit Geisinger.org/pharmacy for more information and to enroll.

Benefit does not include all medications. Benefits and costs will vary depending on specific coverage or enrollment in a cost assistance program. CareSite mail-order program is not available to members whose plans do not include GHP prescription coverage and/or access to CareSite mail order.



GHP Family 90-day prescriptions for maintenance medications

Applies to: All prescribing providers Plan(s): GHP Family

As of April 1, 2019, your GHP Family patients should be prescribed 90-day supplies for their maintenance medications. Patients will have the choice of filling these prescriptions at any participating GHP Family network pharmacy.

The 90-day supply policy for maintenance medications will offer cost savings and convenience to your GHP Family patients and has been approved by the Pennsylvania Department of Human Services (DHS). Controlled substances and specialty medications are excluded from this policy.

For more information regarding the new GHP Family pharmacy policy, see the February edition of the monthly provider update available on NaviNet. See what your GHP family patients are hearing about the program now in the <u>Spring</u> 2019 member newsletter available under *Members/Newsletters* at <u>GHPFamily.com</u>.

Check the <u>online formulary</u> to see what drugs are covered by GHP Family. GHP pharmacy customer service can be reached at 855-552-6028.

GHP Family encounter data reminder

Applies to: All providers Plan(s): GHP Family

Encounter data are necessary to characterize the context and purpose of each item and service provided to a Medical Assistance (MA) enrollee by any healthcare service provider. Encounter data are used by both Medicaid and contracted Managed Care Organizations to understand program costs, evaluate program quality and identify service utilization patterns. Encounter data are often referred to as claims data even when no claim for payment may actually be made.

Remember to submit claims and/or encounter data whenever you see your GHP Family patients, regardless of whether any member cost-sharing is due or if any additional or secondary payment is expected from Medicaid. If you have claims questions that cannot be resolved through NaviNet or Instamed, call our customer care team at 800-447-4000.

Co-prescribing of Naloxone in high risk patient populations

Applies to: All prescribing providers Plan(s): All plans

The Centers for Disease Control and Health and Human Services guidelines recommend co-prescribing of naloxone with opioids to patients who may be at an increased risk of overdose from opioids. Prescribers should consider offering naloxone to patients at high risk, including those with a history of overdose or substance abuse disorder, who are receiving high opioid doses (> 50MME/day) or those who are concurrently taking a benzodiazepine.* Naloxone syringes, naloxone cartridges, and Narcan® nasal spray are available on formulary for your GHP patients who may benefit from having naloxone on hand.

* https://www.cdc.gov/drugoverdose/pdf/guidelines_at-a-glance-a.pdf

Formulary and policy updates

Visit Geisinger Health Plan on NaviNet.net today to view new, revised and recently reviewed medical and pharmaceutical policies, as well as the latest clinical guidelines, formulary changes and drug recalls. Updates may affect prior authorization. The most current prior authorization list is also available on NaviNet.net. Clinical guidelines, formulary and medical policy information are also available in the "For Providers" section at GeisingerHealthPlan.com. Printed copies are available upon request.

Medical policy update

GHP uses medical policies as guidelines for coverage decisions made within the insured individuals written benefit documents. Coverage may vary by line of business. Providers and members are encouraged to verify benefit questions regarding eligibility before applying the terms of the policy. <u>Click here for updates</u>.

The following policies have been reviewed with no change to the policy section. Additional references or background information was added to support the current policy.

- MP040 Somnoplasty/ Coblation
- MP049 Visual Field Testing
- MP054 Prophylactic Mastectomy
- MP057 Prophylactic Oophorectomy
- MP072 Perc disc Decomp. Nucleoplasty
- MP093 Uroleume
- MP098 Genetic Testing/Colorectal CA
- MP101 Gliasite Radiation Therapy
- MP129 Total Parenteral Nutrition
- MP131 VitalStim NMES
- MP135 Osseointegrated Hearing Device
- MP146 Sympathetic Therapy
- MP150 Carotid Artery Stent
- MP154 Transanal Radiofrequency Therapy for Fecal Incontinence (Secca)
- MP193 Microvolt T-wave Alternans
- MP199 Corneal Pachymetry
- MP204 Nasal and Sinus Surgery

- MP213 Computerized Corneal Topography
- MP218 Serum Antibodies for the Diagnosis of Inflammatory Bowel Disease
- MP228 HPV DNA Testing
- MP229 Prolozone Therapy
- MP232 Autism Spectrum Disorder Evaluation and Medical Management
- MP259 Phototherapy for the Treatment of Dermatological Conditions
- MP277 Vision Therapy/ Orthoptics
- MP289 Dry Eye Syndrome
- MP290 Fecal Microbiota Transplantation
- MP294 Intercostal Nerve Block

GHP continues to solicit physician and non-physician provider input concerning medical policies. Your feedback is encouraged and appreciated. Comments should be sent to Phillip Krebs at pkrebs@GeisingerHealthPlan.com.

Formulary and policy updates

The following policies have been reviewed with no change to the policy section.

- MBP 22.0 Xolair (omalizumab)
- MBP 75.0 Stelara (ustekinumab)
- MBP 89.0 Xgeva (denosumab)
- MBP 128.0 Blincyto (blinatumomab)
- MBP 141.0 Nucala (mepolizumab)
- MBP 145.0 Cinqair (reslizumab)
- MBP 156.0 Imfinzi (durvalumab)
- MBP 173.0 Fasenra (benralizumab)
- MBP 174.0 Luxturna (voretigene-neparvovec-rzyl)
- MBP 175.0 Mepsevii (vestronidase alfa-vjbk)
- MBP 177.0 Prevymis IV (letermovir)
- MBP 178.0 Zilretta (triamcinolone acetonide ER injection)

For questions regarding drug benefits call 800-988-4861, 8:00 a.m. to 5:00 p.m., Monday through Friday.

