

Obtain your PROMISe™ ID to continue seeing CHIP and GHP Kids patients

DHS regulations require that you must enroll with the Pennsylvania Department of Human Services (DHS) to continue seeing GHP Kids and other Children’s Health Insurance Program (CHIP) enrollees in 2018. We encourage you to enroll immediately to minimize any disruption to your GHP Kids patients. Providers not registered with DHS at each service location risk delayed processing and/or denial of claims.

DHS has implemented Affordable Care Act (ACA) provisions requiring all providers and other practitioners who render, order, refer or prescribe items or services to CHIP enrollees be enrolled with DHS as a provider. You must complete an enrollment application for your provider type for each service location (provider’s address) and submit all required documents to DHS. All applications, requirements and the step-by-step instructions are available at [CHIP Provider Enrollment Information on the DHS website](#).

Notes on enrolling with DHS

- If you have already enrolled in the Pennsylvania Medical Assistance (MA) program, you do not need to enroll again.
- If you are a part of another state’s Medicaid or CHIP program or enrolled in Medicare, you still must enroll with DHS.
- If you receive this notification from multiple CHIP managed care organizations, you are only required to enroll once.
- Each location at which you practice must be separately enrolled.
- Although you will be enrolled in DHS’s Provider Reimbursement and Operations Management Information System (PROMISe™), you will not become a MA provider nor be required to render services to MA beneficiaries.
- Your current reimbursement methodology for GHP Kids members, as indicated in your agreement with GHP, will not change.

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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.

HPM50 GHP MPU March 2018
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Discuss mail order pharmacy benefits with your Geisinger Gold members

CareSite, Geisinger's mail order pharmacy, offers cost savings for Gold members who are in their initial coverage phase for prescription drugs. For example:

- Copay for a 30-day supply at retail: \$3.00
- Copay for a 90-day supply at retail (2.5 times member copay): \$7.50
- Copay for a 90-day supply via CareSite (1.5 times member copay): \$4.50

This benefit does not include all medications and is not available for Secure Rx members. Cost savings will vary based on specific coverage and enrollment in cost assistance programs. Copay discounts only apply in your patient's initial coverage phase. Your patient's initial coverage phase may end more quickly depending on their use of Tier 3, Tier 4 and other high-cost medications.

The GHP pharmacy customer service team can be reached at 800-988-4861. You can also call CareSite at 844-878-5562.

NaviNet secure messaging

Secure messaging is often a faster and more convenient way to pose your questions to GHP customer service. Using secure messaging, you can expect a quicker response to your issue and avoid the wait times associated with calling. We encourage you to take advantage of this feature while we work toward improving member eligibility and benefit lookups and other functionality available to healthcare providers on NaviNet.net.

To send a secure message to GHP, look for the Secure Messaging tab under Workflows for this Plan on NaviNet.net.

Update your office information

It is essential we have your current information to best serve GHP members and ensure you receive important communications. Update your information conveniently online. Visit the Healthcare Providers section at GeisingerHealthPlan.com, or look in Provider Tools on the GHP plan central page at NaviNet.net for links to the [online add/change form](#). You may also contact your account manager at 800-876-5357.



Geisinger Gold plan information

Detailed information about [2018 Geisinger Gold plan offerings](#) is available on the GHP plan central page at NaviNet.net.

The Healthcare 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 at NaviNet.net.

Caring about Quality

One of our core values at GHP is to make sure members receive the best quality care. We know you share that value, and we depend on you to address potential gaps in care. Although we constantly encourage members to be proactive, to get recommended preventive screenings and take ownership of their health, that encouragement means a lot more when it is echoed by their doctor.

That's why each month we will tell you what your GHP patients are hearing from us regarding quality initiatives. Coordination among GHP and participating providers will drive better health outcomes for all.



March is colorectal cancer awareness month

Colon cancer screening can save lives. The American Cancer Society recommends people age 50 and older be screened for colorectal cancer, but some people with an increased risk of developing colon cancer may need to be screened before age 50 and/or be screened more often. These include patients with a family history of colorectal cancer or certain medical conditions that predispose to colorectal cancer.

The preferred method to screen for colorectal cancer is a colonoscopy. The American Cancer Society recommends people age 50 and older have a colonoscopy every ten years. An advantage of colonoscopy is that polyps can be removed before they become cancerous.

While colonoscopy is the preferred method of screening, other alternatives exist. This includes Cologuard, which patients can use at home to test stool for signs of colorectal cancer.

The American Cancer Society recommends people age 50 and older have a Cologuard test every 3 years. Approximately 15 percent of patients will have a positive cologuard test which requires a follow up colonoscopy. The Cologuard test is covered for all of your GHP patients.

A commitment to defeat colon cancer

Geisinger has signed the “80% by 2018” pledge, joining more than 500 health organizations across the country in the shared goal of 80% of adults 50 and older being regularly screened for colorectal cancer by 2018.

HEDIS ADHD measure reminder

The HEDIS guidelines for children 6 – 12 years old with a newly-prescribed ADHD medication include specific follow-up visit requirements.

A follow-up visit must be scheduled within 30 days of the initial dispensing date to assess how the medication is working and address any side-effect issues. The 30-day follow-up visit must be a face-to-face visit with a practitioner who has prescribing authority.

Two additional follow-up visits for patient and family within 9 months of the 30-day follow-up visit to monitor the patient's progress on the medication. These appointments can be scheduled with any practitioner. Only one of the two visits may be a telephonic appointment.



You can fax any information that may resolve your patients' open care gaps to GHP quality improvement staff at 570-214-1380.



Everything you need
in one place!

Visit the GHP provider portal
at NaviNet.net today!

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-pharmaceutical policy updates

[Click here for updates.](#) New and revised medical-pharmaceutical policies listed below go into effect April 15, 2018:

- MBP 5.0 Remicade (infliximab), Inflectra (infliximab-dyyb), Renflexis (infliximab-abda) – REVISED
- MBP 104.0 Emend IV (fosaprepitant) – REVISED
- MBP 24.0 Aloxi (Palonosetron) – REVISED
- MBP 113.0 Gazyva (obinutuzumab) – REVISED
- MBP 162.0 Yescarta (axicabtagene ciloleucel) – NEW POLICY
- MBP 163.0 Mylotarg (gemtuzumab ozogamicin) – NEW POLICY
- MBP 164.0 Vyxeos (daunorubicin/cytarabine liposomal) – NEW POLICY
- MBP 165.0 Rituxan Hycela (rituximab/hyaluronidase) – NEW POLICY
- MBP 166.0 Adcetris (brentuximab vedotin) – NEW POLICY

[The following policies were reviewed with no changes:](#)

- MBP 88.0 Halaven (eribulin mesylate)
- MBP 91.0 Yervoy (Ipilimumab)
- MBP 97.0 Kyprolis (carfilzomib)
- MBP 141.0 Nucala (mepolizumab)
- MBP 142.0 Portrazza (necitumumab)
- MBP 143.0 Praxbind (idarucizumab)
- MBP 151.0 Spinraza (nusinersen)

Formulary update

The latest formulary changes were effective March 20, 2018.

GHP Pharmacy and Therapeutics Committee reviews and approves changes to the formulary bi-monthly. Recent updates to the formulary are available online at GeisingerHealthPlan.com. The [online formulary drug search](#) includes updates to covered drugs, quantity limits, tiering levels and pharmacy management procedures. Updates may affect prior authorization.

You may also call customer service to receive a printed version of the formulary list. For questions regarding drug benefits, call the customer service team at 800-988-4861, 8:00 a.m. to 5:00 p.m., Monday through Friday.

GHP clinical guidelines are always available to providers. [Click here](#) or visit us on [NaviNet.net](#).

Formulary and policy updates

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 and providers and members are encouraged to verify benefit questions regarding eligibility before applying the terms of the policy. [Click here for updates](#). **The new and revised medical policies listed below go into effect April 15, 2018:**

- MP147 Artificial Intervertebral Disc – REVISED – clarified indication language
- MP171 Clinical Guideline Development, Implementation and Review Process – REVISED – clarified language
- MP237 Transurethral Radiofrequency Tissue Remodeling – REVISED – revised title and policy language
- MP252 Colon Motility Testing – REVISED – clarified exclusion language
- MP275 Speech Generating Devices – REVISED – clarified exclusion language
- MP316 High Intensity Focused Ultrasound – NEW POLICY

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.

- MP184 Intracranial Percutaneous Transluminal Angioplasty
- MP192 Intensity Modulated Radiation Therapy
- MP207 Corneal Hysteresis
- MP211 Endovascular Repair of Intracranial Aneurysms
- MP220 Epiretinal Radiation Therapy
- MP222 Intradiscal Biacuplasty
- MP223 Functional Anesthetic Discography
- MP231 Facet or Sacroiliac Joint Denervation
- MP235 Total Facet Arthroplasty
- MP238 Ocular Blood Flow Tonometer
- MP248 SNP's To Predict Risk of Non-Familial Breast CA
- MP249 Bioimpedance Spectroscopy
- MP254 Tinnitus Treatment
- MP255 Comparative Genomic Hybridization for Evaluation of Developmental Delay
- MP264 Ventricular Assist Device (VAD)
- MP281 Bone Morphogenetic Protein
- MP282 Termination of Pregnancy
- MP285 Tonsillectomy
- MP286 Cholecystectomy
- MP303 Molecular Markers to Predict Thyroid FNA (Fine-Needle Aspiration)
- MP313 Environmental Lead Testing

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.