SmartHealth

Provider Newsletter, December 2023

This newsletter shares important updates, reminders and resources related to the Ascension SmartHealth medical plan

Medical Specialty/Medical Benefit Drug Prior Authorization process updates

Physician administered specialty medications, or infusion therapies are subject to PA approval. Prior Authorization criteria for each of the following drugs was reviewed and approved by the October 2023 National Ascension TAG Committee. Beginning January 1, 2024, these <u>additional</u> medical benefit drugs (<u>medical</u> specialty drugs) listed below will require PA approval:

HCPC\$ Code	Brand Name	HCPCS Description	Requirement	Effective Date	Clinical Category
J9021	Rylaze	Inj, aspara, rylaze, 0.1 mg	PA Request	1/1/2024	Oncology
J1559	Hizentra	INJECTION, IMMUNE GLOBULIN (HIZENTRA), 100 MG	PA Request	1/1/2024	Immunodeficiency
J9264	Abraxane	Injection, paclitaxel protein-bound particles, 1 mg	PA Request	1/1/2024	Oncology
J9305	Alimta	Inj. pemetrexed nos 10mg	PA Request	1/1/2024	Oncology
J1575	Hyqvia	Injection, immune globulin/hyaluronidase, 100 mg immuneglobulin	PA Request	1/1/2024	Immunodeficiency
J1555	Cuvitru	Injection, immune globulin (cuvitru)	PA Request	1/1/2024	Immunodeficiency
J9202	Zoladex	Goserelin acetate implant, per 3.6 mg	PA Request	1/1/2024	Oncology
J9332	Vyvgart	Inj efgartigimod 2mg	PA Request	1/1/2024	Oncology
J1558	Xembify	Inj. xembify, 100 mg	PA Request	1/1/2024	Immunodeficiency
J1454	Akynzeo	Injection, fosnetupitant 235 mg and palonosetron 0.25 mg	PA Request	1/1/2024	Anti-emetics
J1551	Cutaquig	Inj cutaquig 100 mg	PA Request	1/1/2024	Immunodeficiency
J9036	Belrapzo	Injection, bendamustine hydrochloride, (Belrapzo/bendamustine), 1 mg	PA Request	1/1/2024	Oncology
J0491	Saphnelo	Injection, anifrolumab-fnia, 1 mg	PA Request	1/1/2024	Oncology
J1302	Enjaymo	sutimlimab-jome	PA Request	1/1/2024	Oncology
J0879	Korsuva	Injection, difelikefalin, 0.1 microgram, (for esrd on dialysis)	PA Request	1/1/2024	Oncology
J9273	Tivdak	tisotumab vedotin-tftv	PA Request	1/1/2024	emolysis
J9359	Zynlonta	loncastuximab tesirine-lpyl	PA Request	1/1/2024	Oncology
J2329	Briumvi	ublituximab-xiiy	PA Request	1/1/2024	Multiple Sclerosis
J9347	Imjudo	J9347: Injection, tremelimumab-actl, 1 mg	PA Request	1/1/2024	Oncology
J9999 (unspecified)	Columvi	Columvi/glofitamab-gxbm	PA Request	1/1/2024	Oncology
J9999 (unspecified)	Epkinly	epcoritamab-bysp	PA Request	1/1/2024	Oncology
J1449	Rolvedon	Injection, eflapegrastim-xnst	PA Request	1/1/2024	Neutropenia
J2777	Vabysmo	Inj, faricimab-svoa, 0.1mg	PA Request	1/1/2024	Oncology
J9063	Elahere	Injection, mirvetuximab soravtansine-gynx	PA Request	1/1/2024	Oncology
J9380	Tecvayli	Inj teclistamab cqyv	PA Request	1/1/2024	Oncology
J0218	Xenpozyme	Injection, olipudase alfa-rpcp, 1 mg	PA Request	1/1/2024	Enzyme Deficiency
J1747	Spevigo	Injection, spesolimab-sbzo	PA Request	1/1/2024	Auto-inflammatory Conditions
J9350	Lunsumio	Inj mosunetuzumab-axgb	PA Request	1/1/2024	Oncology
J1426	Amondys 45	casimersen	PA Request	1/1/2024	Duchenne Muscular Dystrophy
J1428	Exondys 51	eteplirsen	PA Request	1/1/2024	Duchenne Muscular Dystrophy
J1429	Vyondys 53	golodirsen	PA Request	1/1/2024	Duchenne Muscular Dystrophy
J1954	Lutrate	Leuprolide Acetate	PA Request	1/1/2024	Oncology
J1427	Viltepso	Viltepso (viltolarsen)	PA Request	1/1/2024	Duchenne Muscular Dystrophy
J9036	Belrapzo	Injection, bendamustine hydrochloride, (belrapzo/bendamustine)	PA Request	1/1/2024	Oncology
J9034	Bendeka	Injection, bendamustine hcl (bendeka), 1 mg	PA Request	1/1/2024	Oncology

If you have questions, or to see a current list of all medical benefit drugs (medical specialty drugs) requiring PA approval, visit our website at mysmarthealth.org/plan-coverage/pharmacy and navigate to the "Provider administered specialty medications or infusion therapies" section. The Medical Specialty Formulary and PA list can be found here: Medical Benefit Drug List/MSPA Formulary. Please note only Medical Specialty Drugs on this formulary (link above) will be covered by SmartHealth.

The instructions are also listed below:

To submit a precertification notification or prior authorization request for a physician-administered product or infusion therapy (medical drug/ medical specialty drug) listed above:

- 1. Download the medical benefit drug precertification notification and PA form on website or here
- 2. Complete and sign the PA form
- 3. Submit the completed and signed PA form:

Via fax to 512-831-5499 (or) via the Interactive Provider Portal.

MaxorPlus is proud to partner with SH providers in 2024

Effective January 1, 2024, our pharmacy benefit manager (PBM) will shift from Cigna to MaxorPlus, and SmartHealth will move to a managed prescription formulary.

MaxorPlus will help you find new ways to get patients the prescriptions they need safely, conveniently and cost-effectively.

1) Ascension SmartHealth **Home Delivery.** Please send new prescriptions by:

Electronic Fax: 833-347-0798

Fax: 844-540-8208

Phone: 833-633-7279

Submit e-prescriptions to NABP - 5934268

2) Ascension SmartHealth **Specialty.** Please send new prescription by:

Fax: 248-865-3771

Phone: 855-292-1427

Submit e-prescriptions to NABP - 2356738

3) Submit ePAs through the CoverMyMeds Portal: https://www.covermymeds.com/main/prior-authorizations-forms/maxor/

If you still have questions or need assistance, please contact MaxorPlus Member Services at 888-839-4448. The MaxorPlus Member Services phone line is open 24/7/365.

We are constantly finding new ways to engage with you to increase transparency, encourage lower cost and drug prescribing, and collaborate on care improvement activities. **Here's how we do it:**

- **Electronic Prior Authorization (ePA).** We integrate with CoverMyMeds and SureScripts.
- Electronic Prescribing Tools (eRx). We give you access to client drug coverage in EHRs.

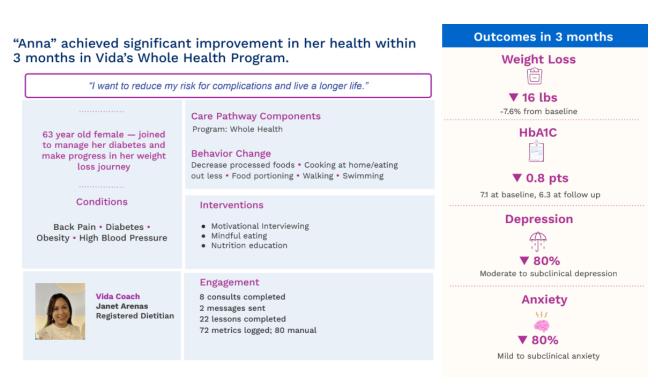
SmartHealth's national ancillary providers

Many Ascension ministries have lab services available within their own facilities. In those situations, those lab services should always be used. To view the national ancillary provider list for supplies, DME and other services, please click <u>here</u>.

If you have any questions, please call 888-492-6811.

New 2024 criteria for Diabetes GLP - 1 (Ozempic, Rybelsus, and Mounjaro)

- Previous 2023 prior authorizations expire on 3/31/2024
- Documentation of Type II diabetes diagnosis required
- Therapy Initiation: A1C of 7% or greater for new starts/initiation of therapy
- Renewal/continuation of therapy: A1C of >I=6.5% **(or)** clinical documentation of positive response to therapy (e.g. chart notes/labs are provided to confirm improvement in A1C levels)
- Member enroll in <u>Vida Health</u> a digital cardiometabolic program for diet and weight loss
- Vida Health is provided to SmartHealth members with no out of pocket costs
- Vida Health is available 24/7 online or via app
- Scheduled visits with coaches and dieticians with Vida are available 8AM-8PM Monday-Friday, and Saturdays from 8AM-12PM (all time zones)



ABA Therapy/prior authorization update

ABA Therapy will require prior authorization effective 1/1/2024. The prior authorization lists will be updated on the SmartHealth website by 1/1/2024 in this <u>section</u>. Retroactive authorization after services have been provided will not be approved. A new prior authorization request <u>form</u> has been posted to the website in December for the new year.

Reminder about virtual care benefits

Ascension Online Care is no longer available but SmartHealth members will still have access to the same services and providers on Amwell.

SmartHealth members can use online care benefits with Amwell to talk with an experienced doctor through a video visit for their urgent care needs 24/7. They can also schedule a mental health appointment online with an experienced psychiatrist, psychologist or counselor.

These providers are in the SmartHealth network but are not employed by Ascension. Members can visit <u>smarthealth.amwell.com</u> to get started or by downloading the Amwell mobile app.

Update on preventive services

There was a change for January 1, 2023 in the way SmartHealth processes preventative services. In years past, we have paid claims that were not billed correctly and all lab tests ordered with an annual physical were paid at 100%. Starting in 2023, we are holding providers accountable for billing with correct diagnosis codes and only paying those services on the Preventative Services list at 100% *IF* the claim has the appropriate diagnosis code also listed on the PPACA document. There were also changes to the allowed frequency for colonoscopies such as one every 10 years instead of 1 per year. Age limits still apply.

Only the services on the <u>Preventative Services List</u> will pay at 100% with no cost share or co-pay if the appropriate screening diagnosis code is used in the *first position* on the claim. For example: Many providers will bill what was found during the colonoscopy such as polyps but if it was truly a screening colonoscopy, the screening diagnosis code should go first, then list what was found second for the claim to pay as a screening benefit.

Laboratory tests from independent labs must have an appropriate diagnosis code entered for each lab to pay as diagnostic benefit (with co-pays/cost share). They will not pay with Z00.00 if the test is not listed on the PPACA list (Preventive Services list reference with a link above). Labs denied as "not covered as routine" would be provider liability for not following the plan guidelines per contract language.

New interactive PA portal and UM phone and fax numbers

For a comprehensive list of procedures with the appropriate ICD-10 or CPT codes, please refer to the **prior authorization code list** posted on <u>mysmarthealth.org</u>.

Medical Services:

To request a prior authorization, the following may be utilized:

- 1) <u>Interactive Portal</u> (NEW!). Registration is required. You can view a recorded training session webinar here. (make sure link now works.)
- 2) Fax a completed prior authorization form to 586-693-4768 with supporting clinical documentation
- 3) Call Ascension Insurance Utilization Management Gateway at 844-217-8191 (NEW!)

Please remember to submit prior authorization requests in a timely manner. This allows SmartHealth to appropriately manage member care and administer benefits.

Medical Specialty Pharmacy Drugs:

To request a prior authorization, the following may be utilized:

- Interactive Provider Portal (NEW)
- Fax a completed prior authorization form to 512-831-5499 with supporting clinical documentation (NEW)
- Call Ascension Medical Specialty Pharmacy at 833-980-2352 (NEW)

Important end of year reminders

With the end of the year almost here, please consult our <u>Provider Resources page</u> to find information and support you need to deliver quality care. Here you can:

- View the 2023 provider manuals for each state
- Find coverage information for Tiers 1, 2 and 3
- Discover important information regarding filing claims and checking claim status
- · View services that require prior authorization, medical code list and prior authorization form
- Review the National Ancillary provider list for supplies, DME and other services



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