

Georgia Provider News

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Information from Anthem for Care Providers about COVID-19

Published: Apr 1, 2020 - Administrative

For the most up-to-date information from Anthem about COVID-19, please bookmark Provider News Home and check back often.

URL: https://providernews.anthem.com/georgia/article/information-from-anthem-for-care-providers-about-covid-19-11

Provider transparency update

Published: Apr 1, 2020 - Administrative

A key goal of Anthem's provider transparency initiatives is to improve quality while managing health care costs. One of the ways is through Anthem's value-based programs such as *Enhanced Personal Health Care, Bundled Payment Programs, Oncology Medical Home, and so on* – called the "Programs." Certain providers ("Value-Based Program Providers" also known as "Payment Innovation Providers") in Anthem's various value-based programs receive quality, utilization and/or cost data, reports, and information about the health care providers ("Referral Providers") to whom the Value-Based Program Providers may refer their patients covered under the Programs. If a Referral Provider is higher quality and/or lower cost, this component of the Programs should result in the provider getting more referrals from Value-Based Program Providers. The converse should be true if Referral Providers are lower quality and/or higher cost.

Providing this type of data, including comparative cost information, to Value Based Program Providers helps them make more informed decisions about managing health care costs and maintaining and improving quality of care. It also helps them succeed under the terms of the Programs.

Additionally, employers and group health plans (or their representatives or vendors) may also be given quality/cost/utilization information about Value Based Program Providers and Referral Providers so that they can better understand how their health care dollars are being spent and how their health benefits plans are being administered. This will, among other things, give them the opportunity to educate their employees and plan members about the benefits of using higher quality and/or lower cost health care providers.

Anthem will share data on which it relied in making these quality/cost/utilization evaluations upon request, and will discuss it with Referral Providers - including any opportunities for improvement. For questions or support, please refer to your local Market Representative or Care Consultant.

URL: https://providernews.anthem.com/georgia/article/provider-transparency-update-21

HEDIS 2020 Federal Employee Program® medical record request requirements

Published: Apr 1, 2020 - Administrative

Centauri Health Solutions is the contracted vendor to gather member medical records on behalf of the Blue Cross and Blue Shield Federal Employee Program. We value the relationship with our providers, and ask that you respond to the detailed requests in support of risk adjustment, HEDIS and other government required activities within the requested timeframe. Centauri Health will work with you to obtain records via fax, mail, remote electronic medical record (EMR) access, or onsite scanning/EMR download (as necessary). We ask that you please promptly comply within **five (5) business days** of the record requests. If you have any questions, please contact Ify Ifezulike with Blue Cross Blue Shield Federal Employee Program at (202) 626-4839 or Mary Kay Sander with Centauri at (636) 333-9145.

URL: https://providernews.anthem.com/georgia/article/hedis-2020-federal-employee-program-medical-record-request-requirements

Anthem acquires Beacon Health Options

Published: Apr 1, 2020 - Administrative

Anthem completed its acquisition of Beacon Health Options, a large behavioral health organization that serves more than 36 million people across the country. The company will operate as a wholly owned subsidiary of Anthem.

Bringing together our existing solid behavioral health business with Beacon's successful model and support services creates one of the most comprehensive behavioral health networks in the country. It's also an opportunity to offer best-in-class behavioral health capabilities and whole person care solutions in new and meaningful ways to help people live

their best lives.

From the standpoint of our customers and providers at this time, it's business as usual:

- Members should continue to call the customer service number on the back of their membership card or access their health plan's website for online self-service.
- Providers should continue to use the provider service contact information, websites and online self-service portals as part of their agreement with either Anthem or Beacon.
- There will be no immediate changes to the way Anthem or Beacon manage their respective provider networks, contracts and fee arrangements. Anthem and Beacon provider networks, contracts and fee arrangements will remain separate at this time.

We know our providers continue to expect more of their healthcare partner, and at Anthem, we aim to deliver more in return.

For more details, please see the press release.

URL: https://providernews.anthem.com/georgia/article/anthem-acquires-beacon-health-options-7

Anthem continues focus on updates to our public provider website

Published: Apr 1, 2020 - Administrative

At Anthem, we continue to make changes to our public provider website to make it easier for you to find the information you need. The end of Q1 brings a few updates for the site at anthem.com:

- Information has been added to our website regarding Patient-Centered Specialty Care (PCSC) Anthem's value-based payment program for cardiology, endocrinology and obstetrics/gynecology providers. You can find this information online as an extension of our broader patient-centered, value-based care program Enhanced Personal Health Care (EPHC).
- Documents listed on the Prior Authorization page can be conveniently accessed via online links.

- Medicare Advantage will be live in the coming days. You will be able to view updated
 Medicare Advantage pages on the commercial public sites.
- Medical Policies (MP) and Clinical Utilization Management Guidelines (CUMG) now display on our newly designed Web pages.

If you have any questions, please contact Michelle Fraser at michelle.fraser@anthem.com or Nick Kizirnis at nick.kirzinis@anthem.com.

URL: https://providernews.anthem.com/georgia/article/anthem-continues-focus-on-updates-to-our-public-provider-website

Provider COVID-19 Update: State Health Benefit Plan

Published: Mar 27, 2020 - State & Federal / State Health Benefit Plan

Effective immediately, the State Health Benefit Plan (SHBP) has elected to expand their telehealth coverage for members and to waive any member out-of-pocket costs for telehealth visits, including visits for mental health, for a temporary period. This means member out-of-pocket costs for Anthem's telemedicine service, LiveHealth Online, and care received from other telehealth providers is waived. The expansion of telehealth services will allow for telephonic communication, video cell phone communication and audio & video technology, to help members easily connect with providers, while maintaining compliance with social distancing.

For the latest provider news from Anthem Blue Cross and Blue Shield, please visit Provider News Home. If you have specific questions on SHBP coverage for members, you can contact 855-641-4862, and then press 9. If you have any questions related to your contract, please contact your Anthem provider representative.

URL: https://providernews.anthem.com/georgia/article/provider-covid-19-update-state-health-benefit-plan-1

Anthem to delay most 4/1/2020 formulary list updates for commercial health plan pharmacy benefit

Published: Apr 1, 2020 - Products & Programs / Pharmacy

In light of the current situation with COVID-19, we have decided to delay the implementation

The changes listed below will still go into effect on 4/1/2020:

	National/Preferred	Traditional	Essential
	Drug List	Open	Drug List
		Drug List	
Antihistamines			
carbinoxamine 6mg	Tier 1 -> NF	Tier 1 -> Tier 3	Tier 1 -> NF
Topical Anesthetics			
Lidocaine 7%-Tetracaine	Tier 3/NF -> NF	Tier 3 (No	NF (No Change)
7% cream		Change)	
Pliaglis cream	Tier 3/NF -> NF	Tier 3 (No	NF (No Change)
		Change)	

Please note, this update does not apply to the Select Drug List and does not impact Medicaid and Medicare plans.

URL: https://providernews.anthem.com/georgia/article/anthem-to-update-formulary-lists-for-commercial-health-plan-pharmacy-benefit-

Pharmacy information available on anthem.com

Published: Apr 1, 2020 - Products & Programs / Pharmacy

For more information on copayment/coinsurance requirements and their applicable drug classes, drug lists and changes, prior authorization criteria, procedures for generic substitution, therapeutic interchange, step therapy or other management methods subject to prescribing decisions, and any other requirements, restrictions, or limitations that apply to using certain drugs, visit anthem.com/pharmacyinformation. The commercial and marketplace drug lists are posted to the web site quarterly (the first of the month for January, April, July and October).

To locate "Marketplace Select Formulary" and pharmacy information, scroll down to "Select Drug Lists." This drug list is also reviewed and updated regularly as needed.

FEP Pharmacy updates and other pharmacy related information may be accessed at fepblue.org > Pharmacy Benefits.

URL: https://providernews.anthem.com/georgia/article/pharmacy-information-available-on-anthemcom-59

Anthem prior authorization updates for specialty pharmacy are available

Published: Apr 1, 2020 - Products & Programs / Pharmacy

Prior authorization updates

Effective for dates of service on and after July 1, 2020, the following specialty pharmacy codes from current or new clinical criteria documents will be included in our prior authorization review process.

Please note, inclusion of NDC code on your claim will shorten the claim processing time of drugs billed with a Not Otherwise Classified (NOC) code.

To access the clinical criteria document information please click here.

Anthem's prior authorization clinical review of non-oncology specialty pharmacy drugs will be managed by Anthem's medical specialty drug review team. Review of specialty pharmacy drugs for oncology indications will be managed by AIM Specialty Health® (AIM), a separate company and are in italics.

Clinical Criteria	HCPCS or	Drug
	CPT Code(s)	
*ING-CC-0003	C9399	Xembify
	J3490	
	J3590	
ING-CC-0062	J3590	Eticovo
ING-CC-0062	J3490	Hadlima
ING-CC-0072	J0179	Bevou
ING-CC-0152	J3490	Vyondys 53
ING-CC-0153	C9399	Adakveo
	J3490	
	J3590	
ING-CC-0154	C9399	Givlaari
	J3490	
	J3590	

Article Attachments

step.therapy.updates.tables 4.1.20.pdf application/pdf - 509.89

KB

Step therapy updates

Effective for dates of service on and after July 1, 2020, the attached specialty pharmacy codes from new or current clinical criteria will be included in our existing specialty pharmacy medical step therapy review process.

Orencia will be the non-preferred agent for rheumatoid arthritis, polyarticular juvenile idiopathic arthritis and psoriatic arthritis. The attached table will assist you in identifying the applicable preferred agents and clinical criteria.

To access the clinical criteria document information please click here.

URL: https://providernews.anthem.com/georgia/article/anthem-prior-authorization-updates-for-specialty-pharmacy-are-available

^{*} Non-oncology use is managed by Anthem's medical specialty drug review team; oncology use is managed by AIM.

MCG care guidelines 24th edition

Published: Apr 1, 2020 - Policy Updates

Effective July 1, 2020, we will upgrade to the 24th edition of MCG care guidelines for the following modules: Inpatient & Surgical Care (ISC), General Recovery Care (GRC), Chronic Care (CC), Recovery Facility Care (RFC), and Behavioral Health Care (BHC). The below tables highlight new guidelines and changes that may be considered more restrictive.

Goal Length of Stay (GLOS) Changes for Inpatient & Surgical Care (ISC) and Behavioral Health Care (BHC)

Guideline	MCG	24th Edition	23rd Edition
	Code	GLOS	GLOS
Aortic Valve	S-1320	2 days	3 days
Replacement,		postoperative	postoperative
Transcatheter			
Appendectomy, with	S-185	Ambulatory or 2	2 days
Abscess or Peritonitis,		days postoperative	postoperative
by Laparoscopy			
Appendectomy,	S-175	Ambulatory	Ambulatory or 1
without Abscess or		postoperative	day
Peritonitis, by			postoperative
Laparoscopy			
Repair of Pelvic	S-1020	Ambulatory	Ambulatory or 1
Organ Prolapse		postoperative	day
			postoperative
Urethral Suspension	S-850	Ambulatory	Ambulatory or 1
Procedures		postoperative	day
			postoperative
Appendectomy, with	P-30	Ambulatory or 2	2 or 3 days
Abscess or Peritonitis,		days postoperative	postoperative
by Laparoscopy,			
Pediatric			
Appendectomy,	P-20	Ambulatory	Ambulatory or 1
without Abscess or		postoperative	day
Peritonitis, by			postoperative
Laparoscopy,			
Pediatric			
Tibial Osteotomy,	S-1131	Ambulatory or 1	1 day
Child or Adolescent		day postoperative	postoperative
Schizophrenia	B-014-IP	5 days	6 days
Spectrum Disorders,			
Adult: Inpatient Care			
Schizophrenia	B-027-IP	5 days	6 days
Spectrum Disorders,			
Child or Adolescent:			
Inpatient Care			

Transcranial Magnetic	B-801-T	Utilize B-801-T for	Refer to	
Stimulation		Clinical Indications	BEH.00002 for	
		for procedure	Clinical	
			Indications for	
			procedure	

New Optimal Recovery Guidelines (ORGs) for Inpatient & Surgical Care (ISC) and New Behavioral Health Care (BHC) New Guidelines

Body System	Guideline Title	MCG -
		Code
Pediatrics	Appendectomy, with Abscess or	P-35
	Peritonitis, Pediatric	
Pediatrics	Appendectomy, without Abscess or	P-25
	Peritonitis, Pediatric	
Home Care	Attention-Deficit and Disruptive	B-003-HC
Behavioral Health	Behavior Disorders	
Home Care	Autism Spectrum Disorders	B-012-HC
Behavioral Health		

Anthem Customizations to MCG care guideline 24th Edition

Effective July 1, 2020, the following MCG care guideline 24th edition customizations will be implemented.

- Carotid Artery Stenting (W0165) Clinical Indications were customized to reference CG-SURG-76 Carotid, Vertebral and Intracranial Artery Stent Placement with or without Angioplasty
- Deep Brain Stimulation (W0164) Clinical Indications were customized to refer to SURG.00026 Deep Brain, Cortical, and Cerebellar Stimulation.
- Vagus Nerve Stimulation, Implantable (W0166) Clinical Indications were customized to refer to SURG.00007 Vagus Nerve Stimulation.

View a detailed summary of customizations here. Scroll down to other criteria section and select Customizations to MCG Care Guidelines 24th Edition.

For questions, please contact the provider service number on the back of the member's ID card.

Medical drug benefit Clinical Criteria updates November 2019

Published: Apr 1, 2020 - State & Federal / Medicare

On November 15, 2019, the Pharmacy and Therapeutics (P&T) Committee approved *Clinical Criteria* applicable to the **medical drug benefit** for Anthem Blue Cross and Blue Shield. These policies were developed, revised or reviewed to support clinical coding edits.

The *Clinical Criteria* is publicly available on the provider websites, and the effective dates will be reflected in the *Clinical Criteria* Web Posting November 2019. Visit *Clinical Criteria* to search for specific policies.

For questions or additional information, use this email.

ABSCRNU-0124-20

URL: https://providernews.anthem.com/georgia/article/medical-drug-benefit-clinical-criteria-updates-november-2019-1

2020 Medicare risk adjustment provider trainings

Published: Apr 1, 2020 - State & Federal / Medicare

The Medicare Risk Adjustment Regulatory Compliance team at Anthem Blue Cross and Blue Shield offers two provider training programs regarding Medicare risk adjustment and documentation guidelines. Information for each training is outlined below.

Medicare Risk Adjustment and Documentation Guidance (General)

- When: The trainings will be offered the first Wednesday of each month from 1:00 p.m. to 2:00 p.m. ET (from January 8, 2020, to December 2, 2020).
- **Learning objective**: This onboarding training will provide an overview of Medicare risk adjustment, including the Risk Adjustment Factor and the Hierarchical Condition Category (HCC) model, with guidance on medical record documentation and coding.

• **Credits**: This live activity has been reviewed and is acceptable for up to 1 prescribed credit(s) by the American Academy of Family Physicians. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

For those interested in joining us to learn how providers play a critical role in facilitating the risk adjustment process, register for one of the monthly training sessions using the following link: Medicare Risk Adjustment and Documentation Guidance (General)

Note: Dates may be modified due to holiday scheduling.

Medicare Risk Adjustment, Documentation and Coding Guidance (Condition Specific)

- **When**: The trainings will be offered on the third Wednesday of every other month from noon to 1:00 p.m. ET (from January 15, 2020, to November 18, 2020).
- **Learning objective:** This training series will provide in-depth disease information pertaining to specific conditions, including an overview of their corresponding hierarchical condition categories (HCC), with guidance on documentation and coding.
- **Credits**: This live series activity has been reviewed and is acceptable for credit by the American Academy of Family Physicians. Physicians should claim only the credit commensurate with the extent of their participation in the activity

For those interested in joining us for this six-part training series, please see the list of topics and scheduled training dates below:

- 1. Red Flag Hierarchical Condition Categories (HCCs), part one (January 15, 2020): register for a recording of the session: Training will cover HCCs most commonly reported in error as identified by CMS (Chronic Kidney Disease Stage 5, Ischemic or Unspecified Stroke, Cerebral Hemorrhage, Aspiration and Specified Bacterial Pneumonias, Unstable Angina and Other Acute Ischemic Heart Disease, End-Stage Liver Disease).
- 2. Medicare Risk Adjustment Documentation and Coding Guidance: Red Flag HCC's Part 2 (March 18, 2020): Training will cover HCCs most commonly reported in error as identified by CMS (Atherosclerosis of the Extremities with Ulceration or Gangrene, Myasthenia Gravis/Myoneural Disorders and Guillain-Barre Syndrome, Drug/Alcohol Psychosis, Lung and Other Severe Cancers, Diabetes with Ophthalmologic or Unspecified Manifestation)
- 3. **Neoplasms** (May 20, 2020)
- 4. Acute, Chronic and Status Conditions (July 15, 2020)

- 5. Diabetes Mellitus and Other Metabolic Disorders (September 16, 2020)
- 6. **Topic TBD** (November 18, 2020): This Medicare risk adjustment webinar will cover the critical topics and updates that surface during the year

ABSCRNU-0125-20

URL: https://providernews.anthem.com/georgia/article/2020-medicare-risk-adjustment-provider-trainings-2

Medical drug benefit Clinical Criteria updates December 2019

Published: Apr 1, 2020 - State & Federal / Medicare

On December 18, 2019, and December 23, 2019, the Pharmacy and Therapeutics (P&T) Committee approved *Clinical Criteria* applicable to the **medical drug benefit** for Anthem Blue Cross and Blue Shield. These policies were developed, revised or reviewed to support clinical coding edits.

The Clinical Criteria is publicly available on the provider websites, and the effective dates will be reflected in the Clinical Criteria Web Posting December 2019. Visit Clinical Criteria to search for specific policies.

For questions or additional information, use this email.*

* IngenioRx, Inc. is an independent company providing pharmacy benefit management services on behalf of Anthem Blue Cross and Blue Shield.

ABSCRNU-0130-20

URL: https://providernews.anthem.com/georgia/article/medical-drug-benefit-clinical-criteria-updates-december-2019

Keep up with Medicare news

Published: Apr 1, 2020 - State & Federal / Medicare

Please continue to check Important Medicare Advantage

Updates at anthem.com/medicareprovider for the latest Medicare Advantage information,

including:

- EXPRESS: Talking Points for COVID-19 Virus-ABS
- Coding tip for psychological and neuropsychological testing
- Medical Policies and Clinical Utilization Management Guidelines update
- New MA Opioid Treatment Program benefit
- Prior authorization requirements: new 2020 codes for coverage and precertification

ABSCRNU-0106-19, ABSCRNU-0122-20, ABSCRNU-0126-20, ABSCRNU-0120-20

URL: https://providernews.anthem.com/georgia/article/keep-up-with-medicare-news-121