



PROVIDER CONNECTION

University of Utah Health Plans
Provider Publication
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REMINDER: PROVIDER CONNECTION NOW AVAILABLE ONLY ONLINE

As we notified you in the Fall 2018 edition, *Provider Connection* is now available only online. Moving to digital-only content reduces our environmental impact and administrative costs. You'll continue receiving important information in the newsletter, such as announcements, updates to medical policies, helpful tips, and more. If you currently receive the newsletter in the mail, we will send a postcard to your office when new editions are available. The postcard will provide a link to the online location.

In addition to being the environmentally responsible solution, having the newsletter online makes it easier to share with everyone in your office. To ensure you receive the latest newsletter as soon as it's available, [subscribe to our email list](#). We promise we won't spam you, and we'll never share your information.

Subscribe today to stay in the know.

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HEALTH PLANS
UNIVERSITY OF UTAH

INTRODUCING TWO NEW LEADERS

We are pleased to announce two recent leadership appointments.

Lisa K. Fallert, R.N. has joined University of Utah Health Plans as Chief Operating Officer. Ms. Fallert directs the strategic development, growth and operations of the health plan. In this role, she is responsible for general oversight and leadership of health plan operations with direct accountability for core functions such as Medical Management, Behavioral Health, Pharmacy, Claims and Customer operations, and Business Systems. She will also work closely with enterprise and health plan executives in strategic planning, population health management, and operational improvement projects across various functional areas.



Elizabeth Armour-Roth, BSN, MHL, has been appointed Director of Clinical Operations. In this position, Ms. Armour-Roth is responsible to oversee all Medical Management operations, including Care Management, Utilization Management, and Quality programs. Medical Management operations ensure our members receive safe, quality care at the most appropriate cost.



Each of these executives bring many years of experience, a broad range of skills, and recognized strategic excellence to their positions. We're excited to work with them to implement their innovative visions.

FIND SPECIALIZED CARE WITH OUR IMPROVED ONLINE DIRECTORY

University of Utah Health Plans members can now search for behavioral health providers who specialize in the specific area of care members need. Using our "Find a Provider" tool, members can select the "Provider Specialty" and "Provider Area of Interest" that will lead them to the providers most qualified to address the member's concern.

For example, rather than choosing a "Psychology" specialist then finding out at their appointment that the therapist's focus is on depression rather than addressing addictive behaviors, members can choose a gambling addiction specialist directly. Additional fields such as Provider Language, Gender, and Hospital Affiliation will help our members identify the providers who will make them feel the most comfortable.

The "Provider Area of Interest" functionality helps our members receive the best care with the least frustration, quickly and easily. If you are a behavioral health professional, please review your profile in our [online directory](#) and email any changes needed to [Provider Relations](#). Medical areas of interest will be added in future upgrades.

RECEIVE PRIOR AUTHORIZATION AND APPEAL RESPONSES FASTER

To make it easier to submit prior authorization and appeal requests, we've streamlined our online and FAX options to get your request and documentation directly to the responsible team. While we prefer [online submissions](#), please use the option which fits best with your workflow.

Online Prior Authorization Form – Complete the online [Prior Authorization Form](#) and upload your documentation into the same convenient form. Click “Submit” and you're set! If all needed information is submitted in your request, you'll typically receive a response within six business days.

Online Appeals Form – Complete the online [Appeals Form](#) and upload your documentation into the same form, then click “Submit.” For timeliest processing, be sure to submit all needed information with your appeal.

FAX submissions – If you prefer, you may FAX your prior authorization or appeals request and documentation straight to the team that will be reviewing it. Fill out the [Prior Authorization Form](#) or [Appeals Form](#) online, print, and FAX it to the appropriate team:

- » Prior Authorization – **801-213-1358**
- » Transitions (inpatient notifications, SNFs, rehabilitation facilities) – **801-213-2132**
- » Appeals – **801-587-9985**
- » Pharmacy
 - Medical – **801-213-1547**
 - Retail – **844-316-6544**

RECOMMEND THE WELLNESS BUS FOR UNDERSERVED COMMUNITIES



We appreciate that you want to see your patients thrive, whether or not they have insurance. The Wellness Bus is a great way to help underserved communities make progress on their health without constant doctor office visits. The Wellness Bus strives to reduce barriers to care by creating a trusting, caring, and relaxed environment with a ‘neighborhood’ feel.

- » The Wellness Bus benefits communities by bringing health screenings, prevention and education on chronic disease to neighborhoods where people live, work, and play.
- » The Wellness Bus’s inclusive environment seeks to make minority and underserved communities feel welcome.

- » The Bus is staffed with Community Health Workers, Dieticians, Diabetes Educators, and Health Coaches.
- » The Wellness Bus offers free blood pressure screening, BMI measurements, POC (point of care) screenings for glucose, A1c, and cholesterol, and health coaching to anyone who visits.
- » University of Utah Connect2Health program volunteers are embedded on The Wellness Bus offering free referrals to community resources addressing social needs that are affordable and welcoming to its clients.
- » Starting in April, the University's dental students will be offering free oral health exams.
- » The Wellness Bus's staff help encourage at-risk individuals to get the care they need as soon as possible.
- » Bus staff are multilingual and multicultural.
- » The fact that all services are FREE is encouraging to many Bus visitors.
- » The Bus serves as an informal resource for ANYONE to visit who seeks health and wellness guidance.
- » Health Coaching is available to help those that want to make healthy life changes to improve the quality of their health.
- » The Bus is a safe, no-strings attached, non-intimidating, community wellness center.

[Learn more about The Wellness Bus](#) services and scheduled locations.

REFER MEMBERS TO OUR ASTHMA CARE MANAGEMENT PROGRAMS



To help members better control their asthma symptoms, we've implemented the Asthma Care Management Program. Our expert Nurse Care Managers provide one-on-one asthma education and support to members and their family. Refer patients who would benefit from care management by calling **801-587-2815** option 3.

As an added service for Healthy U members, we partner with Salt Lake County's [Green & Healthy Homes Initiative](#) to conduct home evaluations for Healthy U members to identify and assist members to decrease asthma triggers in their home environment. A range of services are available as needed, from providing the member with a HEPA filter vacuum to replacing carpet. Contact [Green & Healthy Homes](#) to refer an eligible member.

BEHAVIORAL HEALTH RESOURCES FOR MEDICAL AND BEHAVIORAL HEALTH PROFESSIONALS

We value the care you provide our members and recognize that you are the front line support when vulnerable members are experiencing behavioral or mental health issues. With the nationwide shortage of behavioral health professionals, it's important for providers and staff in your clinic to have tools at their disposal to recognize and assist these individuals.

The Utah Division of Substance Abuse and Mental Health (UDSAMH) is providing the following trainings to provide you with intervention tools that can help bridge the gap from medical to behavioral health care.

- » **Utah Zero Suicide Summit – July 19, 2019**
A day of training, skill-building workshops, and inspiration to improve the care you provide to individuals at risk of suicide. CMEs and CEUs may be provided, pending approval by the UMA. Visit [Utah Zero Suicide Summit](#) to learn more and register.
- » **At-Risk in Primary Care – Online training at your convenience**
Free virtual training to equip you with effective techniques to discuss mental health and substance abuse with patients in your clinic.
 - Learn more from [UDSAMH](#)
 - Access the training at [At-Risk in Primary Care](#) – Use the enrollment key “udhs” to create an account if you don’t already have one, then launch the training

University of Utah Health has also established [Behavioral Health ECHO](#), which provides educational and case-based learning opportunities for healthcare providers throughout the Mountain West.

- » Although only two live sessions remain in the 2019 academic year, [past behavioral health sessions](#) covering a variety of topics are available to view.
- » Additional [mental health forms, resources, and checklists](#) are also available on the site. This information is valuable for personal study or clinic in-service training.

Diagnosis and intervention for behavioral health concerns usually does not begin in a therapist’s office. Be sure everyone in your clinic can recognize a patient’s subtle signs that may otherwise go undiagnosed.

ULTRAVIOLET PHOTOTHERAPY (ACTINOTHERAPY) NOW COVERED WITH NO COPAY OR COINSURANCE

To provide the most costeffective therapy to our members, **effective July 1, 2019**, U of U Health Plans will no longer apply copayment or coinsurance amounts for **CPT 96900 – actinotherapy (ultraviolet)** when it is used to treat psoriasis or other skin conditions requiring narrow-band UVB phototherapy. Purchase of an ultraviolet light system for these conditions is also covered with no copay or coinsurance when the device is medically necessary and prior authorized. Members will continue to be responsible for their standard deductibles, in accordance with their benefit plan.

Psoriasis can be a difficult disease to treat and having all tools available to members and providers is important. Phototherapy is a well-established and effective therapy in the treatment of psoriasis; however, many members struggle with the personal cost of this therapy due to the cumulative out-of-pocket cost they experience. This often results in members and providers choosing highercost and, in some instances, lessestablished methods to treat the condition.

Covering actinotherapy with no copay or coinsurance provides greater access and reduces the cost burden often associated with these chronic skin conditions.

REMINDER: MEMBER RIGHTS AND RESPONSIBILITIES

Note: This information is shared with every member at time of enrollment.

WHAT ARE MEMBER RIGHTS?

University of Utah Health Plans want to give our members the best care and service. As a Health Plans member, members have the right to:

- » Get information about the organization, plan, its services, its practitioners and providers and member rights and responsibilities.
- » Be treated with respect, dignity and a right to privacy.
- » Have their medical visits, conditions, and records kept private.
- » Ask for and receive a copy of their medical record, and ask to have it corrected if needed.
- » Get information about their health and medical care, such as how a treatment will affect the member and their treatment options.
- » Make decisions about their health care with their healthcare provider, including refusing treatment.
- » Talk to U of U Health Plans about appropriate or medically necessary treatment options, regardless of cost or benefit coverage.
- » Voice a complaint or appeal about the organization or the care it provides.
- » Make recommendations about these rights.
- » Use their rights at any time without being treated badly.
- » Be free from restraint or seclusion if it is used to coerce (force), discipline, retaliate, or for convenience.
- » Get health care within appropriate time frames.
- » Receive the following information upon request:
 - Member rights and responsibilities
 - The services U of U Health Plans offers
 - How to get help and emergency care when their doctor's office is closed
 - Involvement in medical research
 - Grievances and Appeals
 - How U of U Health Plans operates such as our policy for selecting providers, what we require of them, any practice guidelines (rules) they use to care for members, and our confidentiality policy.



If members need help understanding any of this information, call us at **888-271-5870**.

WHAT ARE MEMBER RESPONSIBILITIES?

To keep members and their family healthy and help us care for them, members need please remember to:

- » Read the Member Guide. If members need help understanding it, please call University of Utah Health Plans Member Services at **888-271-5870**.
- » Follow provider recommendations, plans and instructions for care that members and providers have agreed upon. If members don't agree, or have questions about treatment plan or goals, talk to their provider.

- » Understand members health problems, work with member's provider to develop agreed upon treatment goals and do all members can to meet goals.
- » Keep appointments or let the provider's office know as soon as possible if member can't make it.
- » Supply information needed to the Health Plans and to treating providers in order to provide care.
- » Let the group administrator know if member moves, changes phone number, get married or divorced, have a baby, or someone in the family dies.
- » Respect the staff and property at their provider's office.
- » Stay fit and well by taking care of themselves and their family.
- » Always talk to your doctor about any health information in any newsletter or on any website to make sure it is best for them. Never use this information instead of what your doctor says is best.

REMINDER: OBTAINING UTILIZATION MANAGEMENT CRITERIA

U of U Health Plans makes every effort to assure that services being provided to our members meet nationally recognized guidelines and are provided at the appropriate setting (inpatient or outpatient) and that the length of stay can be supported for medical indications. We reference InterQual and Hayes criteria, nationally recognized guidelines, to help determine medical necessity.

We would be happy to provide you with a copy of the criteria we use to make utilization management (UM) decisions. Please call the UM team at **888-271-5870** option 2, for additional information. You may also email your request for criteria to UUHP_UM@hsc.utah.edu.

HELP PROMOTE WELL-CHILD VISITS FOR HEALTHY U AND INDIVIDUAL MEMBERS

U of U Health Plans is offering Healthy U and Individual/ Small Group Marketplace members a \$25 gift card when they bring their child to a Primary Care Provider (PCP) for a well-child visit. Children turning 3, 4, 5, or 6 years old in 2019 may qualify for this incentive. Visits between January 1 and December 31, 2019 are eligible.

We know how valuable well-child visits are to the continued well-being of children. But time flies; busy parents can easily put off scheduling these important visits. Please join us in encouraging parents to make time for their child's health.

Learn more about this program at [2019 Well-Child Visit Wellness Incentive](#).

Questions? Contact Customer Service at **888-271-5870**.



HEALTHY U MEDICAID

PHYSICIAN ASSISTANTS MUST BILL UNDER SUPERVISING PHYSICIAN

In Utah, Physician Assistants (PAs) providing services to Healthy U members or through the HOME Program must bill through their supervising physician. There is one exception: if a PA is the only provider at a Rural Health Center, then that PA can bill directly. Otherwise, regardless of whether the PA is acting as a primary care provider or a specialist, they must bill under the supervising physician to be paid.

MORE UTAH PATIENTS ELIGIBLE FOR COVERAGE UNDER MEDICAID EXPANSION

Starting April 1, 2019 more than 80,000 additional Utahns became eligible for Medicaid benefits, including parents and adults without dependent children.

The Utah Department of Health automatically enrolled the current Primary Care Network (PCN) population in Medicaid, with their benefits starting April 1, 2019. The remaining uninsured population will need to enroll in Medicaid directly.

Everyone in the Medicaid expansion population will be covered through traditional Fee-for-Service Medicaid, administered through the Department of Health, for the remainder of the 2019 benefit year. These beneficiaries will then be prompted to choose an Accountable Care Organization (ACO), such as Healthy U, in January 2020.

If your patients or staff would like assistance with Medicaid applications:

- » Government Assistance with Medicaid
Phone: **866-435-7414** Online: Jobs.utah.gov/mycase
- » Nonprofit Assistance with Medicaid or Healthcare.gov
Phone: **211** Online: TakeCareUtah.org
- » U of U Health
Online English: uofuhealth.org/medicaid
Online Spanish: <https://healthcare.utah.edu/bill/medicaid-esp.php>

Utah Proposition 3, Medicaid Expansion Initiative, passed in November 2018 and amended in the 2019 Legislative Session (*Senate Bill 96*), expands Medicaid to 100% of the Federal Poverty Level (FPL). This means individuals who earn less than \$12,490 per year, or families of four earning less than \$25,750 are now eligible to enroll. Utah Department of Health opened enrollment for all eligible Utahns under 100% FPL starting April 1, 2019.

This spring, the state will apply for [additional waivers](#) asking for flexibilities in the state Medicaid program which include enhanced federal funding (90/10 match) up to 100% FPL, lock-out periods, enrollment caps, 12-month continuous eligibility, use of federal Medicaid dollars for housing support, limiting presumptive eligibility, and use of federal funds limited by per capita caps, among others. If the state is not granted these waivers, by July 2020 the state will move forward with full Medicaid expansion up to 138% FPL.

ELECTRONIC VISIT VERIFICATION REQUIRED FOR CERTAIN HOME SERVICES

Effective July 1, 2019, visits to Healthy U members for personal care or home health services must be electronically verified. This requirement was published in the April 2019 Utah [Medicaid Information Bulletin](#) (MIB). Refer to article 19-40 for complete information.



SPECIALTY CARE FOR RESTRICTED MEMBERS

Also of note in the April 2019 [MIB](#), article 19-31, claims for specialty services provided to Healthy U members must have the name and NPI of the member's PCP reported as the referring provider.

Specialty service claims reported with any of the following modifiers are eligible for payment only with a referral from the assigned PCP: **23, 25, 26, 30, 47, 55, 56, 62, 75, 80, 91, 82, 90, P1, P2, P3, P4, P5, or P6.**

Refer to the [Medicaid Eligibility Lookup Tool](#) to verify each Healthy U member's eligibility, restriction status, and assigned PCP and pharmacy.

PHARMACY



Our medication and pharmacy information is updated as changes occur. Please visit our [Pharmacy Forms & Guidelines site](#) at least quarterly to view the most recent information.

CODING CORNER

MEDICAL POLICY UPDATES

University of Utah Health Plans uses medical policies as guidelines for coverage determinations in accordance with the member's benefits. Quarterly notice of recently approved and revised medical policies is provided in [Provider Connection](#) for your convenience. The Medical Policy Updates section of this newsletter does not guarantee coverage is provided for the procedures listed. Coverage policies are used to inform coverage determinations but do not guarantee the service is a covered service.

Medical Policies

Policy Number	Policy Name	Effective Date
MP-016 (New)	Infertility Testing and Treatment	1/30/19
<p>Commercial Plan:</p> <p>This policy outlines those tests covered as part of infertility testing, regardless of member having infertility benefit coverage, and those that are not. There is also a list of tests, treatments, and procedures in the policy that are not covered by Health Plans, for any indication, as they are considered investigational and experimental. To obtain a copy of the policy to see these listings, please contact your provider relations representative.</p>		
MP-017 (New)	Radioembolization/Selective Internal Radiation Therapy (SIRT)	1/30/19
<p>Commercial Plan:</p> <p>U of U Health Plans may consider selective internal radiation therapy (SIRT) medically necessary as treatment for individuals with ALL of the following:</p> <ul style="list-style-type: none"> A. Has an ECOG score of 0 or 1 or KPS score >70; and B. Documentation demonstrates a belief that the individual has a ≥3 month survival; and C. One of the following conditions (i, ii, or iii): <ul style="list-style-type: none"> i. Primary treatment for surgical unresectable primary hepatocellular carcinoma (HCC) or, as a bridge to liver transplantation when ALL of the following criteria are met for either indication: <ul style="list-style-type: none"> a. Preserved liver function defined as Child-Pugh Class A or B; and b. Three or fewer encapsulated nodules and each nodule is ≤5 centimeters in diameter; and c. No evidence of extra-hepatic metastases; and d. No evidence of severe renal function impairment; and e. No evidence of portal vein occlusion. ii. Unresectable hepatic metastases from colorectal carcinoma when ALL of the following criteria are met: <ul style="list-style-type: none"> a. With liver-dominant disease; and b. Who are refractory to chemotherapy or are not candidates for chemotherapy or other systemic therapies. iii. Hepatic metastases from neuroendocrine tumors (carcinoid and non-carcinoid) when ALL of the following criteria are met: <ul style="list-style-type: none"> a. With diffuse and symptomatic disease; and b. Systemic therapy has failed to control symptoms. iv. Unresectable primary intrahepatic cholangiocarcinoma <p>U of U Health Plans considers SIRT investigational/experimental for all other indications due to insufficient evidence to support conclusions regarding the efficacy of SIRT on health outcomes.</p>		
MP-018 (Revised)	Cell-free DNA (cfDNA) Testing for Fetal Aneuploidy	2/6/19
<p>Changed the name of the policy to better reflect character of the policy from “Genetic Testing: Cell-free DNA (cfDNA) Fetal Testing” to “Cell-free DNA (cfDNA) Testing for Fetal Aneuploidy”.</p> <p><i>Reference:</i> “Genetic Testing: Cell-Free DNA (cfDNA) Fetal Testing.” Provider Connection - Fall 2018, page 14.</p>		

Medical Policy Updates (continued)		
Policy Number	Policy Name	Effective Date
MP-033 (New)	Genetic Testing for Breast and/or Ovarian Cancer Susceptibility (BRCA1/BRCA2)	1/13/19
<p>Commercial Plan:</p> <p>U of U Health Plans covers screening genetic testing for BRCA1 and BRCA2 mutations when certain criteria for coverage aligned with the Affordable Care Act requirements are met.</p> <p>It also identifies coverage in individuals with triple negative breast cancer being considered for PARP therapy.</p> <p>This policy also outlines exclusions from coverage as investigational including using of genetic testing panels such as Myriad Genetics myRISK®, Ambry Genetics BreastNEXT, or similar hereditary breast/ovarian cancer specialty panels and that testing in minors is considered investigational.</p> <p>To obtain a copy of this policy, please contact your provider relations representative.</p>		
MP-035 (New)	Implantable Hemodynamic Monitor for Managing Patients with Heart Failure (e.g. CardioMEMS)	1/30/19
<p>Commercial Plan:</p> <p>U of U Health Plans does NOT cover implantable hemodynamic monitors (e.g. CardioMEMS) for the management of patients with NYHA* Class III heart failure as the safety and efficacy of this device has not been established.</p>		