

**HPHCURRENT EVENTS****Webinars for New Sleep Diagnostic and Sleep Therapy Program**

As a reminder, effective Sept. 1, 2017, Harvard Pilgrim is updating our sleep studies and sleep therapies authorization program. Changes will include:

- Transitioning to a new vendor, National Imaging Associates, Inc. (NIA), to oversee utilization management of sleep diagnostic studies, including attended and home sleep studies, for members age 18 or older with a risk of sleep disorders who are enrolled in Harvard Pilgrim HMO, POS, PPO, and Access America products
- Allowing coverage for the following 5 additional home sleep study codes with prior authorization: 95800; 95801; 95806; G0398; and G0400 — which are being added to applicable Harvard Pilgrim fee schedules (G0399 is currently eligible for coverage and will remain covered)
- Managing requests for sleep durable medical equipment (DME) directly at Harvard Pilgrim

<b>How to Request Prior Authorization</b>	
<b>For sleep studies</b>	<b>For sleep DME</b>
Contact NIA beginning Aug. 28, 2017 either: <ul style="list-style-type: none"> <li>• Online at <a href="http://www.radmd.com">www.radmd.com</a></li> <li>• By telephone at 800-642-7543</li> </ul> Note: New users can register for access at <a href="http://www.radmd.com">www.radmd.com</a> by clicking on “New User” and following the instructions; access is granted within 1-2 days. Existing RadMD users may use their current account.	Contact Harvard Pilgrim’s Referral and Authorization Unit at least one week prior to the date of service in one of the following ways: <ul style="list-style-type: none"> <li>• Electronically via <i>HPHConnect</i> or NEHEN</li> <li>• By phone: 800-708-4414</li> <li>• By fax: 800-232-0816</li> </ul>

Authorization decisions are typically made within 1-2 business days from the time that NIA receives the clinical information necessary.

For further details — including information about the transition; guidance on how to request authorization for sleep studies and sleep therapy equipment; and links to updated policies — please refer to [last month's \*Network Matters\* article](#).

## **Enroll in a provider education webinar**

In addition, Harvard Pilgrim and NIA will be hosting provider education webinars for those who want to learn more about the new NIA-managed sleep program. This one-hour session will provide useful information about the new sleep management program and an opportunity to receive answers to any questions you may have. Provider education webinars will be offered on the following dates:

- Thursday, Aug. 17 at 8 a.m. EST
- Thursday, Aug. 17 at noon EST
- Tuesday, Aug. 22 at 8 a.m. EST
- Tuesday, Aug. 22 at noon EST
- Wednesday, Aug. 23 at 8 a.m. EST
- Wednesday, Aug. 23 at noon EST
- Tuesday, Aug. 29 at 8 a.m. EST
- Tuesday, Aug. 29 at noon EST

To enroll in one of these sessions, please RSVP at least one week prior to the session you plan to attend by emailing [NIAWebinar@magellanhealth.com](mailto:NIAWebinar@magellanhealth.com) and including the following information in your request:

- “Harvard Pilgrim webinar”
- Webinar date
- Group name
- TIN
- Address
- Phone number
- Number of participants attending from your organization

You will receive a confirmation email from NIA for the webinar session you selected. Please note that you will need a computer with Internet access to view the educational materials presented during the webinar. For further questions, please contact Harvard Pilgrim's Provider Service Center at 800-708-4414. ◆

**Eric Schultz Signs on for CEOs Against Stigma**

Harvard Pilgrim's CEO, Eric Schultz, has signed on to be a part of the [CEOs Against Stigma](#) campaign led by the National Alliance on Mental Illness – Massachusetts (NAMI Mass). The statewide campaign aims to create stigma-free, more productive work environments by encouraging communication and understanding around mental health conditions and by eliminating misconceptions and fear of disclosure.

"We are going to work tirelessly to guarantee a healthy workplace for all Harvard Pilgrim employees, including those who have mental health conditions," said Schultz.

**Leading cause of disability**

According to [a report prepared by NAMI Mass](#), mental illness is the leading cause of disability in the workplace, and the stigma associated with it is the single greatest barrier to treatment. Approximately one out of every five American adults experience some form of mental illness in a given year, with depression and anxiety being especially common. Yet many will never seek treatment due to widespread negative stereotypes about the causes and effects of these issues.

At the core of the CEOs Against Stigma campaign is the concept that, as the most influential person in the organization, the CEO is crucial in enacting change by personally committing to a supportive workplace. And beyond sympathizing with the suffering of fellow workers, which is in itself a strong motivator for CEOs like Schultz, it's important for CEOs to recognize that ignoring stigma related to mental health is bad for business. Untreated mental disorders can lead to workplace accidents and long bouts of absenteeism, which means loss of productivity and loss of money.

**Eliminating barriers to treatment**

Fewer than a third of employees coping with mental illness receive the treatment they need, often due to fear of the ramifications of being labelled as mentally ill by their coworkers and employers. A supportive workplace environment characterized by understanding, open communication, and mutual respect can vastly alleviate the negative effects of depression.

As with mental health disorders like anxiety and depression, stigma is also often a strong deterrent to patients seeking treatment for substance use disorders. The

Engagement of Alcohol and Other Drug Dependence Treatment (IET) HEDIS measure seeks to increase diagnosis and treatment (including follow-up) in patients age 13 and older with substance use disorders. Because patients often do not seek the care they need for such issues due to the stigma attached to them, it is imperative that their PCPs look for the signs and help make them feel comfortable initiating and engaging in treatment with a behavioral health specialist.

***How Optum/UBH can help your patients*** — For complex clinical situations, Optum/UBH is available to provide consultative assistance. Practitioners can call the Optum/UBH Physicians Consultation Service at 800-292-2922. To refer a patient for behavioral health services and to facilitate the coordination of care, call Optum at 888-777-4742. ◆

## CLINICIAN CORNER

### Updates to Medical Policies

Harvard Pilgrim regularly reviews our medical policies and criteria and makes updates based on the current clinical literature and best practices. Based on this ongoing review, Harvard Pilgrim is making the following updates, effective immediately.

#### **Alcohol Ablation for Hypertrophic Obstructive Cardiomyopathy (HOCM)**

Harvard Pilgrim has updated our Alcohol Ablation for Hypertrophic Obstructive Cardiomyopathy (HOCM) Medical Policy to include additional information about the four classes of heart failure and to outline the criteria that must now be met in order for alcohol ablation to be covered for HOCM. Alcohol ablation is considered medically necessary for the treatment of HOCM when the patient displays **all** of the following criteria:

- Severe heart failure symptoms as reflection by the New York Heart Association class III or IV or other symptoms upon exertion (such as syncope or near syncope), non-responsive to drug therapy
- Left ventricular outflow tract gradient greater than or equal to 50 mm Hg at rest or with physiological provocation, including but not limited to exercise or medication administration
- Absence of coronary artery disease that would impede performance of the procedure

Additionally, the following code has been added to the policy as eligible:

93583 – Percutaneous transcatheter septal reduction therapy (e.g., alcohol septal ablation) including temporary pacemaker insertion when performed

Prior authorization is not required.

### **Chest Wall Deformities Reconstructive Procedures**

Harvard Pilgrim has also updated our commercial and Stride<sup>SM</sup> (HMO) Medicare Advantage Chest Wall Deformities Reconstructive Procedures Medical Review Criteria. Previously titled Cosmetic and Reconstructive Chest Surgery Medical Review Criteria, these policies were renamed to more accurately reflect the nature of the procedures. In addition, some clarifications were added to the criteria for coverage, as well as the following coverage exclusions:

- Charges for items or services (e.g., drugs, biologicals) directly related to a non-covered cosmetic procedure
- Cosmetic procedures to reshape body parts in order to improve the member's appearance or self-esteem when no physical functional impairment exists

### **Gynecomastia**

Harvard Pilgrim has also updated our commercial and Stride<sup>SM</sup> (HMO) Medicare Advantage Gynecomastia Medical Review Criteria. Harvard Pilgrim will now require colored photographs to confirm that the patient has Klinefelter's syndrome; documentation that confirms all of the following is required:

- Patient is male and 18 years of age or older (as opposed to the previous cutoff of 17 years of age)
- Physical examination, mammogram, or tissue pathology confirms that breast tissue is glandular, not fatty tissue
- Patient experiences tenderness or pain in breast tissue
- Grade III or IV gynecomastia (unilateral or bilateral) persists more than 1 year or persists after 6 months of unsuccessful medical treatment of pathological gynecomastia

- History excludes alcohol abuse and use of medications or other substances (e.g., hormones, steroids, supplements, herbal products) from contributing to gynecomastia
- Preoperative photographs are provided

In addition, the following code has been added to the Stride<sup>SM</sup> (HMO) Medicare Advantage Gynecomastia Medical Review Criteria as eligible for coverage with prior authorization:

19300 – Mastectomy for gynecomastia

For more information, and for complete coverage criteria and exclusions, please refer to the applicable updated policy:

- [Alcohol Ablation for Hypertrophic Obstructive Cardiomyopathy \(HOCM\) Medical Policy](#)
- [Chest Wall Deformities Reconstructive Procedures Medical Review Criteria](#)
- [Stride<sup>SM</sup> \(HMO\) Medicare Advantage Chest Wall Deformities Reconstructive Procedures Medical Review Criteria](#)
- [Gynecomastia Medical Review Criteria](#)
- [Stride<sup>SM</sup> \(HMO\) Medicare Advantage Gynecomastia Medical Review Criteria](#)



## **CVS Health–NovoLogix: Prior Authorization for Overlapping Medical/Pharmacy Drugs**

As we communicated in the [May](#) and [June](#) issues of *Network Matters*, prior authorizations for select medical drugs for Harvard Pilgrim’s commercial members are now required through CVS Health–NovoLogix.

To align with the medical policies for the drugs being managed by CVS Health–NovoLogix, the Pharmacy Department has also implemented prior authorization policies for the following medications, which overlap the medical and pharmacy benefit:

- Granix
- Krystexxa
- Lupron Depot

- Lupron Depot Ped
- Makena
- Neulasta
- Neulasta Onpro
- Neupogen
- Octreotide Acetate
- Sandostatin
- Sandostatin LAR Depot
- Somatuline Depot
- Zarxio
- Zoledronic Acid

The prior authorization process for obtaining these drugs through the pharmacy benefit is the same as the existing process for all other pharmacy drugs; providers must complete the appropriate [medication request form](#) and fax it to MedImpact Healthcare Systems at 888-807-6643. For more information, please refer to the [Pharmacy section](#) of Harvard Pilgrim's provider website. ◆

### **Benefits of Medication Therapy Management Program**

Harvard Pilgrim's Medication Therapy Management program is an excellent resource for eligible Stride<sup>SM</sup> (HMO) Medicare Advantage patients who may need help managing treatment plans that include several Part D covered medications. This free clinical program educates Stride patients about their medications, and offers them the opportunity to schedule medication reviews with pharmacists to learn how they can improve their drug therapy.

To be eligible for the Medication Therapy Management program, a member must meet **all** of the following criteria:

1. Have at least **two** of the following chronic diseases:
  - Asthma
  - Chronic obstructive pulmonary disease (COPD)
  - Chronic heart failure (CHF)
  - Diabetes
  - Dyslipidemia (high cholesterol)

- Hypertension (high blood pressure)
2. Be taking at least **six** Part D covered medications
  3. Have at least \$3,919 in estimated annual costs on Part D covered medications

Members who qualify for the program are notified via a welcome letter from SinfoníaRX at the Medication Therapy Management Center of the University of Arizona, Harvard Pilgrim’s Medication Therapy Management partner. The letter encourages members to schedule a comprehensive medication review with one of SinfoníaRX’s pharmacists and provides instructions on how to do so, or how to opt out of the program.

### **Comprehensive medication review and follow-up**

A comprehensive medication review is a one-on-one telephone conversation between an eligible Stride member and a SinfoníaRX pharmacist. During the call, the pharmacist reviews all the medications the member takes (including over-the-counter products) and the member can ask the pharmacist questions about these medications.

After the call, SinfoníaRX sends the member a written medication action plan containing a summary of the discussion, recommendations for things the member can do or discuss with his or her provider, and a personal medication list that includes all the medications that the member is taking.

In addition to providing qualifying Stride members with helpful tips on how to take their medications, this program helps lower the risk of drug-related problems like medication errors and side effects, and may reduce the patients’ medication cost by eliminating duplicative therapy and suggesting lower-cost formulary alternatives, if available.

### **Targeted medication review**

SinfoníaRX also conducts targeted medication reviews, during which a pharmacist identifies opportunities to improve a member’s medication regimen using pharmacy claims. This includes looking for drug interactions, gaps in care, and therapeutic duplications. The pharmacist most often reaches out to the provider, but sometimes will contact the member regarding any issues identified through this process.

### **Encourage your eligible patients to participate**

Please consider asking your patients if they have received a welcome letter for Medication Therapy Management services, and if so, encouraging them to register and schedule a comprehensive medication review. You may also want to consider reviewing medication action plans with members who have already completed their CMR. To schedule a comprehensive medication review, patients can call SinfoníaRX directly at 866-218-6646, Monday-Friday, 10 a.m. to 8 p.m. ◆

**P&T Committee Updates**

At the June 5th, 2017 meeting, the Harvard Pilgrim Pharmacy & Therapeutics Committee reviewed three medications and decided the following:

P&T Committee Review and Decisions		
Name	Description and Indication	Decision
Royaldee (calcifediol)	Royaldee (calcifediol) is a vitamin D3 analog indicated for the treatment of secondary hyperparathyroidism in adults with stage 3 or 4 chronic kidney disease and serum total 25-hydroxyvitamin D levels less than 30 ng/mL.	<ul style="list-style-type: none"> <li>• <b>Premium formulary:</b> Continued coverage at non-preferred brand tier with prior authorization and quantity limit</li> <li>• <b>Value formulary:</b> Remains non-covered</li> <li>• <b>Medicare Advantage formulary:</b> Remains non-covered</li> </ul>
Zurampic (lesinurad)	Zurampic (lesinurad) is a URAT1 inhibitor indicated in combination with a xanthine oxidase inhibitor for the treatment of hyperuricemia associated with gout in patients who have not	<ul style="list-style-type: none"> <li>• <b>Premium formulary:</b> Continued coverage at non-preferred brand tier with prior authorization and quantity limit</li> <li>• <b>Value formulary:</b> Added to non-preferred brand tier with prior</li> </ul>

	<p>yet achieved target serum uric acid levels with a xanthine oxidase inhibitor alone.</p>	<p>authorization and quantity limit</p> <ul style="list-style-type: none"> <li>• <b>Medicare Advantage formulary:</b> Added to non-preferred brand tier with prior authorization and quantity limit</li> </ul>
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**Specialty Pharmacy Program Updates**

Harvard Pilgrim’s Specialty Pharmacy Program has added the following medications:

Name	Indication	Coverage	Available From
<p>Austedo (deutetrabenazine)</p>	<p>Indicated for the treatment of chorea associated with Huntington’s disease.</p>	<p>Pharmacy</p>	<p>Limited Distribution Drug: Cardinal Health Specialty Pharmacy</p>
<p>Emflaza (deflazacort)</p>	<p>A corticosteroid indicated for the treatment of Duchenne muscular dystrophy (DMD) in patients 5 years of age and older.</p>	<p>Pharmacy</p>	<p>Limited Distribution Drug: U.S. Bioservices</p>

To request prior authorization for Austedo or Emflaza, providers in Massachusetts should use the [Massachusetts Standard Form for Medication Prior Authorization Requests](#). Providers in all other states should use the drug-specific Medication Request Forms, which are located in the [“Pharmacy” section of our Provider website](#), along with

the clinical coverage criteria. Completed forms should be faxed to MedImpact Healthcare Systems at 858-790-7100. ◆

## **OFFICE ASSISTANT**

### **ACA Risk Adjustment Data Validation: Medical Chart Requests Underway**

As a reminder, in support of the Affordable Care Act's Risk Adjustment Data Validation (RADV) program, the process of medical chart requests is underway. You may receive, or may have already received, a medical chart request from Harvard Pilgrim pertaining to services provided during the 2016 calendar year. Please keep in mind that:

1. Medical chart requests may be for a regular patient of yours or someone who was only seen once in your office.
2. Medical charts must have the patient's name and date of birth, the date of service, the provider's signature and credentials, and date of the provider's signature.
3. Medical charts must be provided within 14 days to meet Harvard Pilgrim's audit timeline requirements.
4. Member authorizations are not required.

If you have questions regarding a RADV medical chart request, please contact Kathryn Roach, Program Manager, at 617-509-2199. ◆

***Network Matters* is a monthly newsletter for the Harvard Pilgrim provider network**

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