



# Provider Connection

SECOND QUARTER 2020

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# A letter of thanks to our provider family:

As this newsletter arrives to your offices, we find ourselves in the midst of the COVID-19 pandemic. These times and this virus are unlike anything we have ever experienced. The challenges we faced – and continue to face – as a healthcare community were swift and monumental. Not only has COVID-19 shifted how and when patients seek care and the delivery of that care, the virus, for many practices, has impacted the business of healthcare and tough decisions regarding staffing models were forced. We are deeply grateful for your continued commitment to patient care, and have our highest respect as you and your staff are placed on the frontline of COVID-19 while simultaneously dealing with the numerous challenges faced by your practices.

As a health plan, PHP understands that information and communication are more vital now than ever to provide the best possible access and care for our members. Through temporary benefit and policy changes, we've helped create more touchpoints with patients at a time when it's difficult to be face to face in an exam room. We will continue to monitor the situation and place the patient at the center of all the decisions.

PHP also understands that getting patients back to care is critical as the virus required providers and patients alike to cancel or postpone appointments and procedures. You have our commitment to support and encourage members to seek the care they've delayed due to COVID-19. PHP will continue with the expansion of certain services that will be necessary to meet the demand you're sure to experience. These services include:

- » Expansion of coverage for telemedicine services through December 31, 2020. PHP has temporarily broadened access to telemedicine services allowing PHP providers to render services via real-time interactive audio and video telecommunication systems. Specific telemedicine codes can be found in PHP's Telemedicine Policy on the PHP Portal under Medical Policies, BCP-50 Telemedicine Services.
- » Addition of ABA therapy, speech, occupational and physical therapy as covered telehealth services from March 1, 2020, to December 31, 2020.

In addition, PHP has provided an early release of your 2019 Primary Care Incentive Payment. PHP's goal is to make every attempt to lift some financial uncertainty during this time. We hope these actions have offered flexibility in supporting your practice during this time. Please visit the Provider Portal for the most current COVID-19-related information or contact the PHP Provider Relations Team. If you do not have a MyPHP Provider Portal account, the Provider Relations Team can assist you to create one as well as provide training to use the portal most effectively.

We are always ready and available to serve you. Should you or your staff have questions, please contact the Provider Relations Team at [PHPProviderRelations@phpmm.org](mailto:PHPProviderRelations@phpmm.org) or call **877.205.2300**.



Thank you,

A handwritten signature in black ink, appearing to read 'Peter Graham, MD'. The signature is fluid and cursive.

**Peter Graham, MD**

Chief Medical Officer, Physicians Health Plan

# Grace Period Extended for Marketplace Plan Members

PHP recognizes the many unexpected situations COVID-19 has created for businesses and their staff, and we are committed to doing all we can to ease those challenges.

To help our members and employer groups during this difficult time, we have extended the grace period for groups and individuals (both on and off Marketplace) from 30 to 90 days.

There are certain CMS regulations for Marketplace Individual members who receive an Advanced Premium Tax Credit (APTC). It is best to check the MyPHP Provider Portal for the most up-to-date information on a member's eligibility and grace periods.

For Marketplace Individuals receiving an APTC:

- » Providers will be paid for all eligible services provided during the **first month** of the grace period.
- » Claims will be pended for the **second and third months** of the grace period.
- » If a member does not pay all outstanding premiums, PHP will not pay eligible claims that are incurred in the second and third months of the grace period.

# Working with PHP: General Training 101

The Provider Relations Team offers training sessions throughout the year to help providers and their office staff work smoothly with PHP.

Learning opportunities include a review of the Provider Manual, checking eligibility and benefits, claim status, authorizations/approvals, and much more. Practice managers and all office staff are welcome to register for these trainings. Due to COVID-19, the trainings will be conducted through webinars.

**July 14, 2020** | 8:30–10 a.m.

**October 15, 2020** | noon to 1:30 p.m.

Please email your RSVP at least one week prior to the event to [PHPProviderRelations@phpmm.org](mailto:PHPProviderRelations@phpmm.org). Please include the date of the training as well as the first and last names and roles of those attending from your office.

Prior to the training date, all registered attendees will receive login information to the email used to register.

Questions? Contact [PHPProviderRelations@phpmm.org](mailto:PHPProviderRelations@phpmm.org)



# PHP Medicare Provider Registration

All providers can access the MyPHP Provider Portal at: [PHPMichigan.com/ProviderPortal](http://PHPMichigan.com/ProviderPortal)  
The Medicare Advantage Provider Portal can be accessed once inside the portal.

## SIGN UP FOR AN ACCOUNT

All first-time users must create a new account by selecting “Proceed to our sign-up process”

You will need:

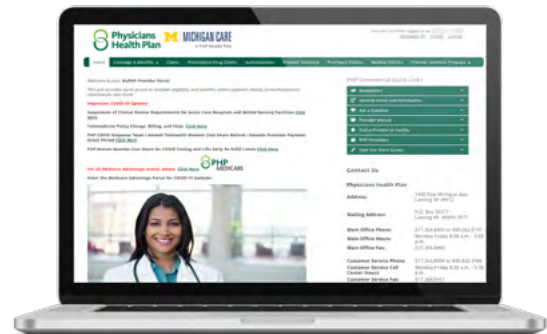
- » User's Last Name
- » User's First Name
- » Tax ID
- » NPI
- » PHP Provider ID
- » Phone
- » User's Role in the Office
- » Create a Username and Password



PHP Medicare Providers: please proceed to the next step.

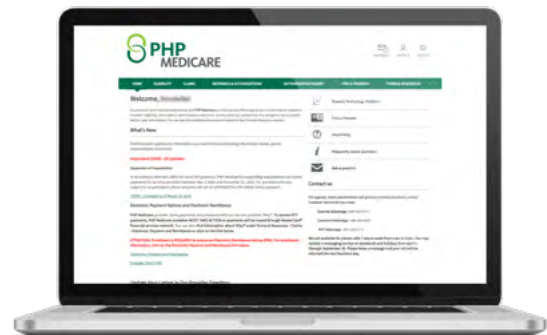
## PHP MEDICARE PROVIDER REGISTRATION

- » Once you have created an account following the instructions above, log in to MyPHP Provider Portal.
- » Under quick links, click on “Medicare Advantage Provider Portal”.
- » Verify the populated information is correct. If any fields are not populated, please complete and then click “Next”.



You will receive an email within 48 hours from [customersupport@lumeris.com](mailto:customersupport@lumeris.com), with the determination of your requested access for PHP Medicare Provider Portal.

MyPHP is easy to use with quick, 24/7 access to information. If you would like to learn more about how to use the MyPHP Provider Portal, please contact the Provider Relations Team at [PHPProviderRelations@phmm.org](mailto:PHPProviderRelations@phmm.org).



# Thank You from The Quality Corner

As PHP closes out the 2020 audit, our HEDIS Nurse Reviewer team would like to extend a sincere thank you to you and your office staff for your assistance in the process. We appreciate your timely response to our requests for records, and your courtesy in allowing us into your office to review and gather documents. The performance scores will provide comparative data that will be used to focus on quality improvement activities in the next year. Thank you for assisting in this essential goal to continue to improve the health of individuals, families, and communities.

Please feel free to contact the Quality Department if you have questions:  
[PHPQualityDepartment@phpmm.org](mailto:PHPQualityDepartment@phpmm.org).



## Check-Up on Men's Health

When it comes to men and health care, the numbers are startling. Compared with women, men are 24 percent less likely to visit their doctor in any given year and 22 percent less likely to get their cholesterol checked. They're also less willing to be screened for cancer, despite the fact that their cancer mortality rates are higher.

June is National Men's Health Month and it's time to check-up on men's health to give much-needed attention to preventable health problems and encouraging early detection and treatment for men and boys.

There is no replacement for an annual physical performed by a qualified provider. However, there are several self-examinations that can easily be performed at home to help detect disease or illness early which leads to better treatment outcomes.

Please encourage the men in your practice to conduct important monthly self-exams including:

- » Testicular Cancer
- » Breast Cancer
- » Oral Health/Gum Disease
- » Heart Rate
- » Skin Cancer
- » BMI
- » Blood Pressure

Use any office visit to remind men of these routine self-exams that can help save their life.





## Evidence-Based Criteria Transition

Effective August 1, 2020, Physicians Health Plan (PHP) is transitioning from MCG, CareWebQI Care Guidelines to Change HealthCare InterQual Criteria. Both solutions offer evidence-based clinical decision support, however, employing Change HealthCare InterQual will synchronize with providers' requests to align with the market-leading clinical criteria.

There will be no process change for providers requesting a prior authorization. Providers can expect the same excellent turnaround time for authorization determinations. In addition, there will be no impact on patient care. Change HealthCare InterQual criteria aligns with evidence-based guidelines as did MCG, CareWebQI Care Guidelines.

Contact your Provider Relations Team by emailing [PHPProviderRelations@phpmm.org](mailto:PHPProviderRelations@phpmm.org) with any questions you may have.

# Utilization Management News and Updates

## 2nd Quarter 2020

A comprehensive list of procedures and services requiring Prior Approval is available on our website at [PHPMichigan.com/providers](http://PHPMichigan.com/providers). Select “Notification and Prior Approval Table” to access the list. This information is also available on the MyPHP Provider Portal.

If you have any questions about the Prior Approval process, please call PHP Customer Service at 517.364.8500 or 800.832.9168 between the hours of 8:30 a.m. to 5:30 p.m., Monday through Friday.

Prior Approval requests may be submitted to Utilization Management by fax at 517.364.8409 from 8 a.m. to 5 p.m., Monday through Friday.

### New Policies

- » BCP-60 Weight Management Services

### Policy Updates

- » BCP-16 Dental-Related General Anesthesia and Facility Charges
- » BCP-51 Kidney Transplantation
- » BCP-36 Orthognathic Surgery
- » BCP-57 Outpatient Rehabilitation/Habilitation Services: Speech Therapy
- » BCP-63 Varicose Vein Treatment
- » PRP-15 Telemedicine Services
- » DDP-45 Specialty and High-Cost Agents
- » DDP-14 Afinitor
- » DDP-11 Interleukin Inhibitors
- » DDP-12 Tumor Necrosis Factor (TNF) Inhibitors





## Changes to Coverage for Services

Code(s)	Procedure or Service	Action	Implementation Date
90867, 90868, 90869	Transcranial magnetic stimulation treatment	Changed from Not Covered to Requires Prior Approval (no longer considered experimental)	7/1/2020
86828 - 86835	HLA typing	Changed from Prior Approval to Covered	7/1/2020
50592	Ablation, one or more renal tumors, percutaneous, unilateral, radiofrequency	Changed from Not Covered to Requires Prior Approval	7/1/2020
50593	Ablation, renal tumor, unilateral, percutaneous, cryotherapy	Changed from Not Covered to Covered; (no longer considered experimental)	7/1/2020
61863, 61864, 61867, 61868	Stereotactic implantation of neurostimulator electrode array	Changed from Covered to Requires Prior Approval	7/1/2020
61885, 61886	Insertion or replacement of cranial neurostimulator pulse generator or receiver	Changed from Covered to Requires Prior Approval	7/1/2020
87635	Infectious agent detection by nucleic acid (DNA or RNA); severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]), amplified probe technique	Covered (waive member cost share)	4/1/2020
L5856, L5857, L5858, L5859, L5961, L5973	Lower extremity prosthetic microprocessor	Changed from Not Covered to Requires Prior Approval	7/1/2020
U0001	CDC 2019 Novel Coronavirus (2019-nCoV) Real-Time RT-PCR Diagnostic Panel	Covered	2/4/2020
U0002	CDC SARS-CoV-2/2019-nCoV (COVID-19)	Covered	2/4/2020
U0003	Infectious agent detection by nucleic acid (DNA or RNA); Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]), amplified probe technique, making use of high throughput technologies as described by CMS-2020-01-R	Covered	3/18/2020
U0004	2019-nCoV Coronavirus, SARS-CoV-2/2019-nCoV (COVID-19), any technique, multiple types or subtypes (includes all targets), non-CDC, making use of high throughput technologies as described by CMS-2020-01-R	Covered	3/18/2020

\*Any provider or member directly impacted by these changes received a direct mailing explaining the changes.

# The PHP Provider Network is Growing Every Day!

In an effort to continuously improve and enhance our provider network and member access to care, PHP has added hundreds of new providers to the network including Behavioral Health Practitioners, Primary Care Physicians, and Specialty Physicians. This has opened many opportunities for our members to see network physicians while staying close to home.

When referring or assisting a member, please review our complete, up-to-date listing of participating network providers at [PHPMichigan.com](http://PHPMichigan.com), listed under “Find a Doctor” or contact PHP Customer Service at 517.364.8500.

## Provider Manual Updates

The PHP Provider Manual is updated frequently, and the most current version is found online at [PHPMichigan.com/Providers](http://PHPMichigan.com/Providers) by selecting “Provider Manual” from the left sidebar. Some of the most recent changes include, but are not limited to, disease management, telehealth services, non-covered services not billable to members, and anesthesia time-based codes. If you have any questions regarding the Provider Manual, please feel free to reach out to the Provider Relations Team at [PHPProviderRelations@phpmm.org](mailto:PHPProviderRelations@phpmm.org).

Providers should use the Provider Manual to obtain information including but not limited to:

- » Referral/Notification/Authorizations Process
- » Credentialing and Re-credentialing
- » Standard of Care Guidelines
- » Responsibilities/Expectations of Health Care Professionals
- » General Guidelines (Admission Services, Emergency Care, etc.)
- » Reimbursement for Health Care Services
- » How to Submit a Claim
- » Clinical Edits
- » Copay, Coinsurance, Deductibles, and Non-Covered Services
- » Fraud, Waste and Abuse



## Drugs New to Market

Drug Name	Formulary Action
Asparlas (calaspargase pegol IV solution)	Medical PA
Beovu (brolucizumab intravitreal solution)	Medical PA
Trikafta (elexacaftor-tezacaftor-ivacaftor tablets)	Tier 4, PA
Reblozyl (luspatercept SQ injection)	Medical PA
Brukinsa (zanubrutinib capsule)	Tier 4, PA
Givlaari (givosiran SQ injection)	Medical PA
Adakveo (crizanlizumab IV infusion)	Medical PA
Oxbryta (voxelotor tablet)	Tier 4, PA

For up-to-date information on drug recalls please visit [PHPMichigan.com/providers](http://PHPMichigan.com/providers). A link to the FDA's drug recall website is available under the Pharmacy Services tab.

## Changes to Current Formulary

Drug Name	Formulary Action
Nayzilam (midazolam nasal spray)	Added quantity limit of 6 doses per 365 days
Remicade	Remicade is excluded, Inflectra & Renflexis are preferred
Pulmicort (budesonide respules)	Added limit of 1mg per day

### Important Things to Remember When Submitting a Prior Authorization Request Form

- » The Medication Authorization Form is located at [phpmichigan.com/Providers](http://phpmichigan.com/Providers) and select "Pharmacy Services" from the left sidebar.
- » Fill out form completely and legibly.
- » If requesting an infusion drug, please include the office name and/or facility and NPI number of where the drug will be administered.
- » Provide accurate provider contact information:
  - » Contact person's name
  - » Phone number
  - » Fax number
- » Include the patient's most current chart notes documenting their status as well as clinical documentation of previous medication trials related to the request.
- » Submissions from Cover My Meds are routinely transmitted with incomplete information which may delay care for the patient. Sending requests directly to PHP will reduce the time it takes to process the request.

## New Provider Data and Delegation Team

To increase provider satisfaction, PHP has designated a Provider Data and Delegation Team. The team will handle W-9 changes, Tax ID changes, address and phone number changes, provider termination requests, etc. To assist with these update requests, please contact the Provider Data and Delegation Team at [PHPProviderUpdates@phpmm.org](mailto:PHPProviderUpdates@phpmm.org).

## Contact us

Department	Contact Purpose	Contact Number	Email Address
Customer Service	<ul style="list-style-type: none"> <li>» To verify a covered person's eligibility, benefits, or to check claim status</li> <li>» To report suspected member fraud and abuse</li> <li>» To obtain claims mailing address</li> </ul>	<p>517.364.8500</p> <p>800.832.9186 (toll free)</p> <p>517.364.8411 (fax)</p>	
Medical Resource Management	<ul style="list-style-type: none"> <li>» Prior authorization of procedures and services outlined in the Notification/Authorization Table</li> <li>» To request benefit determinations and clinical information</li> <li>» To obtain clinical decision-making criteria</li> <li>» Behavioral Health/Substance Use Disorders Services, for information on mental health and/or substance use disorders services including prior authorizations, case management, discharge planning, and referral assistance</li> </ul>	<p>517.364.8560</p> <p>866.203.0618 (toll free)</p> <p>517.364.8409 (fax)</p>	
Network Services	<ul style="list-style-type: none"> <li>» Credentialing - report changes in practice demographic information</li> <li>» Coding</li> <li>» Provider/Practitioner education</li> <li>» To report suspected Provider/Practitioner fraud and abuse</li> <li>» EDI claims questions</li> <li>» Initiate electronic claims submission</li> </ul>	<p>517.364.8312</p> <p>800.562.6197 (toll free)</p> <p>517.364.8412 (fax)</p> <p><b>Report Suspected Fraud and Abuse:</b> 866.PHPCOMP (866.747.2667)</p>	<p><b>Credentialing</b> PHP.Credentialing@phpmm.org</p> <p><b>Provider Relations Team</b> PHPPProviderRelations@phpmm.org</p>
Pharmacy Services	<ul style="list-style-type: none"> <li>» Request a copy of our Preferred Drug List</li> <li>» Request drug coverage</li> <li>» Fax medication prior authorization forms</li> <li>» Medication Therapy Management</li> </ul>	<p>517.364.8545</p> <p>877.205.2300 (toll free)</p> <p>517.364.8413 (fax)</p>	<p><b>Pharmacy</b> PHPParmacy@phpmm.org</p>
Quality Management	<ul style="list-style-type: none"> <li>» Quality Improvement programs</li> <li>» HEDIS</li> <li>» CAHPS</li> <li>» URAC</li> </ul>	<p>517.364.8000</p> <p>877.803.2551 (toll free)</p> <p>517.364.8408 (fax)</p>	<p><b>Quality</b> PHPQualityDepartment@phpmm.org</p>
External Vendor	Contact Purpose	Contact Number	Email Address
Change Healthcare (TC3)	<ul style="list-style-type: none"> <li>» When medical records are requested</li> </ul>	<p><b>Mail To:</b> Change Healthcare 5755 Wayzata Blvd, St. Louis Park, MN 55416</p> <p>952.949.3713 949.234.7603 (fax)</p>	<p>MedicalRecords@changehealthcare.com</p>