Transition to the 2/12 CMS1500 Claim Form

The 02/12 1500 Claim Form (CMS 1500) has been approved and the health care industry now needs to implement it as early as January 6, 2014. The updated CMS 1500 form was given final approval by the National Uniform Claim Committee (NUCC) in June of 2013 after many public comment periods since February of 2012. Payers are providing dual use periods from January 6, 2014 to March 31, 2014 where payers will continue to receive both the old CMS1500 and the new 2/12 CMS1500 claim forms.

The main reason for the redesign on the CMS1500 was to align the 1500 form to accommodate ICD-10 reporting needs as well as with changes in the 5010 837P processes. The biggest and most notable changes to the form are the addition of an ICD indicator, an increase in the number of diagnosis codes that can be reported, and the removal of several fields. The ICD indicator, added in Item Number 21, will identify the version of the diagnosis code set being report, i.e., ICD-9 or ICD-10. Users of the form will now be able to report up to 12 diagnosis codes in Item Number 21.

PHP encourages providers to talk to your vendors to ensure compliance will be met by the deadline dates. More information is available on NUCC website, www.nucc.org or by contacting your Provider Relations Coordinator at 517.364.8412.

Have you begun to plan for ICD-10?

With just less than 10 months until implementation date of ICD-10, it is important that our providers have began the communication with the necessary aspects of billing to ensure that you will be ready for ICD-10 by the imposed compliance date. As many of you know beginning October 1, 2014 all health care entities must start to use ICD-10 codes when submitting claims transactions.

ICD-10 codes are completely different from the ICD-9 codes we use today. ICD-9 codes are mostly numeric and have 3 to 5 digits. ICD-10 codes are alphanumeric and contain 3 to 7 characters. ICD-10 is more vigorous and explanatory with "one-to-many" matches to ICD-9 in some instances. Due to the many options that will become available with ICD-10 this will require more specific and detailed clinical documentation to ensure that the reporting is precise.

PHP strongly encourages our providers to look at every aspect of the impact this new process of reporting will have on your practices. If you have not started to prepare for this change PHP strongly encourages providers to start the communication with your billing services, vendors, and clearinghouses to ensure that the planning stages are well on their way to ensure that you are ready for the proposed implementation date.

Enclosures

- PHP ICD-10 Survey
- PHP Notification/Authorization Table Effective 12/1/2013

Please contact your Provider Relations Coordinator if you have any questions about any items or articles in this publication.

We welcome your comments and article ideas for future publications.

This Update is Produced By:
PHP, Network Services Department
PO Box 30377, Lansing, MI 48909-7877
Visit our website at: www.phpmichigan.com

517.364.8312   800.562.6197
fax: 517.364.8412

PHP Fee Schedule Increases

Physicians Health Plan (PHP) is dedicated to improving the health of the PHP membership and our region by providing coverage and access to quality, compassionate care to everyone, every time. We recognize, as a member of our Provider Network, you share in that dedication and commitment every day.

Part of that commitment includes providing our high quality network market competitive reimbursement for services rendered to our membership.

To ensure the PHP fee schedules and payment rates are in line with the market area and aligned with the Centers for Medicare and Medicaid (CMS), a comprehensive review of our fee schedule was completed. We identified areas that were reimbursed significantly above market, others that were below or did not have relativity with CMS. PHP will be making modifications to the standard commercial and PPO fee schedules effective January 1, 2014, positively impacting over 80% of the fee schedule. Other adjustments reflect changes to bring reimbursements in line with our market analysis and methodology.

Thank you for your continued support of the health plan and for all your efforts on behalf of PHP's membership. Should you have any questions, please contact your Provider Relations Coordinator at 517.364.8312 or 1.800.562.6197

Holiday Observation

Physicians Health Plan will be closed in observation of New Years Day, January 1, 2014. If you have an issue that requires immediate assistance, our answering service will be available to assist you.

Access to Care when it's needed

Physicians Health Plan understands that receiving care when and where our members need it is a vital concern. That's why PHP has the following access standards for our in-network physicians and practitioners:

- Physicians and Practitioners must be available through regularly scheduled or on-call coverage 7 days a week, 24 hours a day.
- Patients with emergency needs are to be seen immediately or referred to the emergency department if appropriate.
- Initial appointments are available within 8 weeks.
- Routine non-symptomatic appointments are available within 4 weeks.
- Non-urgent, symptomatic appointments are available within 5 days.
- Appointments for urgent needs are available within 24 hours.
- Waiting room times shall not routinely exceed more than 30 minutes from the time of the appointment until the physician or practitioner sees the patient.

PHP also has the following standards for behavioral health visits:
- Physicians and Practitioners must be available through regularly scheduled or on-call coverage 7 days a week, 24 hours a day.
- Patients with emergency needs are seen immediately or referred to the emergency department if appropriate.
- Appointments for nonlife-threatening emergent problems are available within 6 hours.
- Patients with urgent care needs within 48 hours.
- Routine, non-symptomatic appointments are available within 10 days.
- Follow-up appointments after discharge from the hospital for mental illness should be available within 7 days of discharge.
- Waiting room times shall not routinely exceed more than 30 minutes from the time of the appointment until the physician or practitioner sees the patient.

A copy of the Standards for Accessibility can be obtained by contacting PHP's Quality Management Department at 517.364.8466.

Credentialing Reminder

Don't forget to keep PHP updated with the following information, including:

- Professional Liability limit cover sheets (minimum required coverage limits are $200,000/$600,000)
- CAQH application at least every 6 months
- License renewal information
- Board-certification renewal information
- Change or addition of a practice location
- Adding a new provider to the practice
- Having a provider leave the practice

Fax Updated Information to:
PHP Network Services
517.364.8412

Claim Denial Appeals

Providers have the right to appeal a claim payment rejection in writing within ninety (90) days from the date of rejection. You may submit a letter or use a printed copy of the appeal form located in General Forms and Information under the Providers tab of the PHP website at www.phpmichigan.com. It is recommended that you submit your appeal request with a paper copy of the claim that is being disputed. It is important to include additional information to support the reason for the appeal. This would include information not previously submitted regarding the reason and rationale for the appeal. Additional information may include charts and office notes, radiology or lab/pathology report(s), operative notes or surgery reports.

You may mail or fax the appeal to:

Physicians Health Plan
ATTN: Customer Service, Provider Appeals
PO Box 30377
Lansing, MI 48909
(Fax): 517.364.8411

It is important to note that claim appeal requests received after ninety (90) days from the date of rejection will not be eligible for review and consideration.

Laboratory Testing performed in Office or Urgent Care

PHP reimburses specific laboratory tests in an office or urgent care setting. The specific CPT codes are identified on the allowed laboratory list located on PHP's website www.phpmichigan.com. To view the complete listing of laboratory codes reimbursable in these locations, please refer to the Laboratory Tests List in the Provider Manual, click on *Providers* and then *Provider Manual*. Laboratory services that are not on the allowed list should be sent to an appropriate participating laboratory. Services preformed that are not on this approved list will be rejected as a provider liability and are not billable to a member. For additional information please contact PHP's Customer Service at 517.364.8500.

Did you complete your ICD-10 Survey?

PHP recently sent to all providers an ICD-10 Readiness survey asking a series of questions, to identify where our provider network is with the transition to ICD-10. If you have not completed the survey or previously processed and your ICD-10 status has changed, please take a moment and complete the short survey online at www.surveymonkey.com/s/VFSRLLC . We have also enclosed a paper version of this survey that can be returned to PHP Network Services Department at 517.364.8412.

Prescription Drug List for all products are available in electronic format only. All Prescription Drug Lists can be accessed at www.phpmichigan.com by clicking on *Providers* and then selecting *General Forms and Information*. Hardcopy lists are available upon request. Please contact Customer Service at 1.800.832.9186.

To report any suspected fraud or abuse by either a PHP member or provider, please call 517.267.9990 and press 1 to reach PHP's Compliance Department.

Physicians Health Plan

Physicians Health Plan ICD-10 Readiness Survey

Please answer all the questions completely and fax the completed survey at the number below.

How prepared are you/your vendors for the planned conversion to ICD-10:
- ☐ Have made all necessary changes, completed all internal training and testing
- ☐ Very prepared and have started internal training and testing
- ☐ Have started working on making the necessary changes
- ☐ Preparing but have not had the time to on work on this
- ☐ Haven't even thought about this yet

When do you/your vendors expect to be ready to start testing with PHP?
- ☐ Q1 2014
- ☐ Q2 2014
- ☐ Q3 2014
- ☐ Don't know

When do you/your vendors expect to be production ready to submit ICD-10 compliant claims / transactions?
- ☐ Q1 2014
- ☐ Q2 2014
- ☐ Q3 2014
- ☐ October 1, 2014
- ☐ Q4 2014
- ☐ Don't know

PHP will be utilizing the following processing rules:

- **We will not be translating ICD-10 codes to ICD-9 codes nor will we be translating ICD-9 codes to ICD-10 codes during processing.**

- **Outpatient facility and all professional claims with dates of service prior to 10/1/2014 must utilize ICD-9 codes sets. Outpatient facility and all professional claims with dates of service of 10/1/2014 and after must utilize ICD-10 codes sets.**

- **Inpatient facility claims with a discharge dates prior to 10/1/2014 must utilize ICD-9 codes sets.**

- **Inpatient facility claims with a discharge dates of 10/1/2014 and after must utilize ICD-10 codes sets.**

Will you/your vendors be able to submit claims utilizing these rules?
- ☐ Yes
- ☐ No
- ☐ Don't Know

Provider/Group Name _____ Provider/Group NPI_____

Please fax the completed survey form to 517.364.8412. Thank you.

PHP Notification/Prior Authorization Table-All Products Effective December 1, 2013.

SERVICES / ITEMS / PROCEDURES	Commercial & Federal Employee (FEHB) — Within 1 business day	Prior to Service	Medicaid — Within 1 business day	Prior to Service	MIChild — Within 1 business day	Prior to Service	Self Funded (L0000264; DAS00100, 200, 300) — Within 1 business day	Prior to Service	SPHN (MNA, IUE, UAW & SEIU. DAS00600, 900, 1000, 1200) — Within 1 business day	Prior to Service	SPHN (Non-Union, DAS01100) — Within 1 business day	Prior to Service	PPO — Within 1 business day	Prior to Service
Abortion services	**** N/A	**** N/A		√		√	**** N/A	**** N/A	**** N/A	**** N/A	**** N/A	**** N/A	**** N/A	**** N/A
Acute admissions that are urgent or emergent (including direct admissions) except maternity services for delivery (see below for exception)	√		√		√		√		√		√		√	
Acute maternity admissions that exceed federal mandated LOS (48 hours after delivery for vaginal delivery & 96 hours after cesarean section delivery)	√		√		√		√		√		√		√	
Acute pre-operative days admission		√		√		√		√		*** √		*** √		√
Acute psychiatric/substance abuse admissions that are urgent or emergent (facility notification)	√ *		√ *		Refer to CMH		**** N/A	**** N/A	√		√		√	
Acute rehabilitation admission		√		√		√		√		*** √		*** √		√
Acute scheduled admissions	√		√		√		√			*** √		*** √		√
Acute scheduled psychiatric or substance abuse admissions (facility notification)		√ *		√ *		√ *		√		√		√		√
Autism & Autism Spectrum Disorder Treatment		√ *	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A		√
Bariatric surgery		** √		** √		** √		** √		** √		** √		Δ √
Behavioral Health Services- certain outpatient services		√ *		√	Refer to CMH	Refer to CMH	**** N/A	**** N/A		√		√		√
Behavioral Health Services- day treatment		√	N/A	N/A	Refer to CMH	Refer to CMH	**** N/A	**** N/A		√		√		√
Dental anesthesia: pediatric/adult		√		√		√		√	**** N/A	**** N/A	**** N/A	**** N/A		√
Dental services-accidental		√		√		√		√	**** N/A	**** N/A	**** N/A	**** N/A		√
Durable medical equipment: **ALL** repair/replacement		√		√		√		√		√		√	**** N/A	**** N/A
Durable medical equipment: over $500-purchase price or cumulative rental		√		√		√		√		√		√	**** N/A	**** N/A
Endoscopy and intestinal imaging (capsule only)		√		√		√		√	**** N/A	**** N/A		√	**** N/A	**** N/A
Facet Injections: diagnostic injections up to 3/cal year per level per side-notification only; diagnostic injections > 3 per calendar year & all neurolysis procedures-prior authorization required.		√		√		√		√	**** N/A	**** N/A	**** N/A	**** N/A		√
Gamma knife procedures		√		√		√		√		√		√	**** N/A	**** N/A

Service	Commercial & Federal Employee (FEHB)		Medicaid		MIChild		Self Funded (L0000264; DAS00100, 200, 300)		SPHN (MNA, IUE, UAW & SEIU. DAS00600, 900, 1000, 1200)		SPHN (Non-Union, DAS01100)		PPO	
Genetic testing		√		√		√		√		√		√		√
Home care visits		√		√		√		√		√		√	**** N/A	**** N/A
Hospice services		√		√		√		√	**** N/A	√ Non-network	**** N/A	√ Non-network	**** N/A	**** N/A
Hyperbaric oxygen therapy		√		√		√		√		√		√	**** N/A	**** N/A
Infertility treatment	**** N/A	**** N/A	**** N/A	**** N/A	**** N/A	**** N/A	**** N/A	**** N/A		√		√	**** N/A	**** N/A
Long term acute care admission		√		√		√		√		*** √		*** √		√
Neuropsychiatric testing		√ *		√	Refer to CMH			√	**** N/A	**** N/A		√		√
Non-urgent ambulance requests		√		√		√		√		√		√	**** N/A	**** N/A
Outpatient home infusion services		√		√		√		√		√ Non-network		√ Non-network	**** N/A	**** N/A
Outpatient rehab therapy (PT/OT/Speech/Cardiac/Pulmonary)		√ (N/A for FEHB)		√		√		√		N/A		N/A		√
Procedures that under some conditions may be considered cosmetic: Abdominoplasty, Breast Reduction, Procedures for Gynecomastia, Breast Reconstruction, Jaw Surgeries, Photodynamic Therapy & Special Dermatologic Procedures, Sclerotherapy, Vein Surgery, including stripping and ligation, Eyelid Repair (blepharoplasty, brow ptosis, blepharoptosis), Rhinoplasty, Keloid Scar Revision.		√		√		√		√		√		√		√
Surgical Treatment of Femoroacetabular Impingement (FAI)		√		√		√		√		√		√		√
Prosthetic devices over $1000		√		√		√		√		√		√	**** N/A	**** N/A
Psychodiagnostic testing		√ *		√		√		√		√		√		√
Referral to or services by any non-network or referral network provider including scheduled surgery		**** N/A		√		√		**** N/A		**** N/A		**** N/A		**** N/A
Skilled nursing facility, subacute nursing & rehabilitation services		√		√		√		√		√		√		√
Spinal cord stimulation & sacral nerve stimulation		√		√		√		√		√		√	**** N/A	**** N/A
Transplant services including screening and evaluation		√		√		√		√		√		√		√
Unproven/investigational services including emerging technology/category III codes		√		√		√		√		√		√		√
Uvulopalatopharyngoplasty (UPPP)		√		√		√		√	**** N/A	**** N/A	**** N/A	**** N/A	**** N/A	**** N/A
Weight management services including evaluation, management, surgery & post-surgical procedures		√		√		√		√		√		√		Δ √
90378 # palivizumab (Synagis)		√		√		√		√		√		√		√
J0129 # abatacept (Orencia)		√		√		√		√		√		√		√
J0135 # adalimumab (Humira)		√		√		√		√		√		√		√

PHYSICIANS HEALTH PLAN NOTIFICATION/PRIOR AUTHORIZATION TABLE-ALL PRODUCTS

Code	Drug	Physicians Health Plan — Commercial & Federal Employee (FEHB)	PHP FamilyCare — Medicaid	PHP FamilyCare MIChild — MIChild	Physicians Health Plan — Self Funded (L0000264; DAS00100, 200, 300)	Sparrow Physicians Health Network — SPHN (MNA, IUE, UAW & SEIU. DAS00600, 900, 1000, 1200)	Sparrow Physicians Health Network — SPHN (Non-Union, DAS01100)	PHP Insurance Company — PPO
J0178	# aflibercept Eylea	√	√	√	√	√	√	√
J0180	# agalsidease beta (Fabrazyme)	√	▲	▲	√	√	√	√
J0205	# alglucerase (Ceredase)	√	▲	▲	√	√	√	√
J0220	# alglucosidase alfa (Myozyme)	√	√	√	√	√	√	√
J0221	# alpha alglucosidease alfa (Lumizyme)	√	√	√	√	√	√	√
J0256	# alpha 1 - proteinase inhibitor - human, (Aralast, Aralast NP, Prolastin, Prolastin-C, Zemaira)	√	√	√	√	√	√	√
J0257	# alpha 1 Antitrypsin-AAT (Glassia)	√	√	√	√	√	√	√
J0365	# aprotinin (Trasylol)	√	▲	▲	√	√	√	√
J0485	# belatacept (Nulojix)	√	√	√	√	√	√	√
J0490	# belimumab (Benlysta)	√	√	√	√	√	√	√
J0585-J0588	# Botox injections	√	√	√	√	**** N/A		√
J0597	# c1 esterase inhibitor (Berinert)	√	▲	▲	√	√	√	√
J0598	# c1 esterase inhibitor (Cinryze)	√	▲	▲	√	√	√	√
J0638	# canakimab (Ilaris)	√	√	√	√	**** N/A	**** N/A	√
J0712	# ceftaroline fosamil (Teflaro)	√	√	√	√	√	√	√
J0716	centruroides immune f(ab) (Anascorp)	√	√	√	√	√	√	√
J0718	# certolizumab pegol (Cimzia)	√	√	√	√	√	√	√
J0775	# collagenase, clostridium histolyticum (Xiaflex)	√	√	√	√		√	√
J0795	# corticorelin ovine triflutate (Acthrel)	√	▲	▲	√	√	√	√
J0800	# corticotropin (Acthar)	√	▲	▲	√	√	√	√
J0881-J0882	# darbepoetin alfa (Aranesp)	√	√	√	√	**** N/A	**** N/A	
J0885-J0886	# epoetin alfa (Epogen, Procrit)	√	√	√	√	**** N/A	**** N/A	√
J0897	# denosumab (Prolia-Exgeva)	√	√	√	√	√	√	√
J1290	# ecallantide (Kalbitor)	√	▲	▲	√	√	√	√
J1300	# eculizumab (Soliris)	√	▲	▲	√	√	√	√
J1324	# enfuvirtide (Fuzeon)	**** N/A	▲	▲	**** N/A	**** N/A	**** N/A	**** N/A
J1325	# epoprostenol (Flolan)	√	√	√	√	√	√	√
J1438	# etanercept (Enbrel) ✚	√	√	√	√	√	√	√
J1440-J1441	# filgrastim (G-CSF), (Neupogen)	√	√	√	√	**** N/A	**** N/A	√
J1458	# galsulfase (Naglazyme)	√	▲	▲	√	√	√	√
J1459	# immune globulin (Privigen)	√	√	√	√	√	√	√
J1557	# Immune globulin	√	√	√	√	√	√	√
J1559	# immune Globulin (Hizentra)	√	√	√	√	√	√	√
J1561	# Immune globulin	√	√	√	√	√	√	√
J1566	# immune globulin	√	√	√	√	√	√	√
J1568-J1569	# immune globulin	√	√	√	√	√	√	√
J1640	# panhematin (Hemin)	√	▲	▲	√	√	√	√
J1650	# enoxoprin (Lovenox) ✚	√	√	√	**** N/A	**** N/A	**** N/A	**** N/A

PHYSICIANS HEALTH PLAN NOTIFICATION/PRIOR AUTHORIZATION TABLE-ALL PRODUCTS

		Physicians Health Plan	PHP FamilyCare	PHP FamilyCare MIChild	Physicians Health Plan	Sparrow Physicians Health Network	Sparrow Physicians Health Network	PHP Insurance Company
		Commercial & Federal Employee (FEHB)	Medicaid	MIChild	Self Funded (L0000264; DAS00100, 200, 300)	SPHN (MNA, IUE, UAW & SEIU. DAS00600, 900, 1000, 1200)	SPHN (Non-Union, DAS01100)	PPO
J1675	# histrelin acetate	√	√	√	√	√	√	√
J1725	# hydroxyprogesterone caproate (Makena)	√	√	√	√	√	√	√
J1740	# ibandronate sodium (Boniva)	√	√	√	√	√	√	√
J1743	# idursulfase (Elaprase)	√	√	√	√	√	√	√
J1744	# icatibant (Firazyr) ✚	√	√	√	√	√	√	√
J1745	# infliximab (Remicade)	√	√	√	√	√	√	√
J1785-J1786	# imiglucerase (Cerezyme)	√	▲	▲	√	√	√	√
J1826	# interferon Beta-1A (Avonex) ✚	√		√	**** N/A	**** N/A	**** N/A	**** N/A
J1830	# Interferon Beta-1B (Betaseron) ✚				**** N/A	**** N/A	**** N/A	**** N/A
J1931	# laronidase (Aldurazyme)	√	▲	▲	√	√	√	√
J1955	# levocarnitine (Carnitor)	**** N/A	▲	▲	**** N/A	**** N/A	**** N/A	**** N/A
J2170	# mecasermin (Increlex)	√	√	√	√	√	√	√
J2212	# methylnaltrexone (Relistor)	√	√	√	√	√	√	√
J2260	# milrinone lactate (Primacor)	√	√	√	√	√	√	√
J2323	# natalizumab (Tysabri)	√	√	√	√	√	√	√
J2353-J2354	# octreotide (Sandostatin)	√	√	√	√	√	√	√
J2357	# omalizumab (Xolair)	√	√	√	√	√	√	√
J2358	# olanzapine (Zyprexa Relprevv)	√	√	√	√	√	√	√
J2426	# paliperidone Palmitate ER (Invega)	√	√	√	√	√	√	√
J2504	# pegademase bovine (Adagen)	√	▲	▲	√	√	√	√
J2505	# pegfilgrastim (Neulasta)	√	√	√	√ eff 9/1/13	√ eff 9/1/13	√ eff 9/1/13	√
J2507	# pegloticase (Krystexxa)	√	√	√	√	√	√	√
J2562	# plerixafor (Mozobil)	√	√	√	√	√	√	√
J2724	# protein c concentrate (Ceprotin)	√	▲	▲	√	√	√	√
J2778	# ranibizumab (Lucentis) Prior Notification required for all diagnoses other than 362.07, 362.52, 362.53, 362.62, 362.83	√	√	√	√	√	√	√
J2793	# rilonacept (Arcalyst)	√	▲	▲	√	√	√	√
J2796	# romiplostim (Nplate)	√		√	√	√	√	√
J2940	# somatrem (Protropin)	√	√	√	**** N/A	**** N/A	**** N/A	√
J2941	# somatropin (all growth hormones)	√	√	√	**** N/A	**** N/A	**** N/A	√
J3095	# televancin (Vibativ)	√	√	√	√	√	√	√
J3110	# teriparatide (Forteo) ✚	√	√	√	√	√	√	√
J3262	# tocilizumab, (Actemra)	√	√	√	√	**** N/A	**** N/A	√
J3285	# treprostinil (Remodulin)	√	√	√	√	√	√	√
J3357	# ustekinumab (Stelara)	√	√	√	√	√	√	√
J3385	# velaglucerase alfa (VPRIV)	√	▲	▲	√	√	√	√
J3485	# zidovudine (Retrovir)	**** N/A	▲	▲	**** N/A	**** N/A	**** N/A	**** N/A
J3487	# zoledronic acid (Zometa)	√	√	√	√	√	√	√
J3488	# zoledronic acid (Reclast)	√	√	√	√	√	√	√

PHYSICIANS HEALTH PLAN NOTIFICATION/PRIOR AUTHORIZATION TABLE-ALL PRODUCTS

		Physicians Health Plan Commercial & Federal Employee (FEHB)	PHP FamilyCare Medicaid	PHP FamilyCare MIChild MIChild	Physicians Health Plan Self Funded (L0000264; DAS00100, 200, 300)	Sparrow Physicians Health Network SPHN (MNA, IUE, UAW & SEIU. DAS00600, 900, 1000, 1200)	Sparrow Physicians Health Network SPHN (Non-Union, DAS01100)	PHP Insurance Company PPO
J3490	# Unclassified drugs is a list of drugs without a specific HCPCs or CPT code assigned to it-**PA is required for all of the following medications (the list is subject to change)** : Bevacizumab/Avastin billed with J3490 for the eye: Notification required for all diagnoses other than 362.52, 362.53, 362.62, 362.83), Corifact/Factor XIII, Immune globulin (Bivigam), Omacetaxine mepesuccinate (Synribo), Ocriplasmin (Jetrea), pertuzumab (Perjeta), glucarpidase (Voraxaze), taliglucerase alfa (Elelyso), carfilzomib (Kyprolis), Aripiprozole (Abilify Maintena), Ado-trastuzumab emtansine (Kadcyla), Factor IX (Rixubis), Ferric Carboxymaltose (Injectafer)	√	√	√	√	√	√	√
J3590	# Unclassified biologics	√	√	√	√	√	√	√
J7178	# human fibrinogen concentrate (RiaStap)	√	√	√	√	√	√	√
J7180	# Factor products	√	▲	▲	√	√	√	√
J7183-J7187	# Factor products	√	▲	▲	√	√	√	√
J7189-J7199	# Factor products	√	▲	▲	√	√	√	√
J7308	# aminolevulinic acid HCl (Levulan Kerastick)	√	√	√	√	√	√	√
J7309	# methyl aminolevulinate (MAL), (Metvixia)	√	√	√	√	√	√	√
J7312	# dexamethasone (Ozurdex)	√	√	√	√	√	√	√
J7527	# everolimus (Zortress) ✚	√	√	√	√	√	√	√
J7686	# treprostinil	√	√	√	√	√	√	√
J7699	# NOC drugs, inhalation solution administered through DME	√	√	√	√	√	√	√
J7799	# NOC drugs, other than inhalation drugs, administered through DME	√	√	√	√	√	√	√
J8498	# antiemetic drug, rectal/suppository, not otherwise specified	√	√	√	√	√	√	√
J8499	# prescription drug, oral, non chemotherapeutic, NOS	√	√	√	√	√	√	√
J8562	# fludarabine phosphate (Oforta)	√	√	√	√	√	√	√
J8565	# gefitinib (Iressa)	Health Help must Review	▲	▲	Health Help must Review	Health Help must Review	Health Help must Review	Health Help must Review
J8700	# temozolomide (Temodar)	√	√	√	√	√	√	√
J9002	# doxorubicin hydrochloride liposomal doxil (Lipodox)	√	√	√	√	√	√	√
J9019	# asparaginase (Erwinaze)	√	√	√	√	√	√	√
J9027	# clofarabine (Clolar)	√	√	√	√	√	√	√

		Physicians Health Plan	PHP FamilyCare	PHP FamilyCare MIChild	Physicians Health Plan	Sparrow Physicians Health Network	Sparrow Physicians Health Network	PHP Insurance Company
		Commercial & Federal Employee (FEHB)	Medicaid	MIChild	Self Funded (L0000264; DAS00100, 200, 300)	SPHN (MNA, IUE, UAW & SEIU. DAS00600, 900, 1000, 1200)	SPHN (Non-Union, DAS01100)	PPO
J9041	# bortezomib (Velcade)	Health Help must Review	△	△	Health Help must Review	Health Help must Review	Health Help must Review	Health Help must Review
J9042	# brentuximab vedotin (Adcetris)	√	√	√	√	√	√	√
J9043	# Cabazitaxel (Jevtana)	√	√	√	√	√	√	√
J9155	# degarelix (Firmagon)	√	√	√	√	√	√	√
J9160	# denileukin diftitox (Ontak)	√	√	√	√	√	√	√
J9171	# docetaxel (Taxotere)	√	√	√	√	√	√	√
J9179	# eribulin (Halaven)	√	√	√	√	√	√	√
J9185	# fludarabine phosphate (Fludara)	√	√	√	√	√	√	√
J9225	# histrelin implant (Vantas)	√	√	√	√	√	√	√
J9226	# histrelin implant (Supprelin LA)	√	√	√	√	√	√	√
J9228	# Ipilimumab (Yervoy)	√	√	√	√	√	√	√
J9268	# pentostatin (Nipent)	√	√	√	√	√	√	√
J9302	# ofatumumab (Arzerra)	√	√	√	√	√	√	√
J9307	# pralatrexate	√	√	√	√	√	√	√
J9310	# rituximab (Rituxan)	√	√	√	√	√	√	√
J9315	# romidepsin (Istodax)	√	√	√	√	√	√	√
J9328	# temozolomide (Temodar)	√	√	√	√	√	√	√
J9351	# topotecan (Hycamtin)	√	√	√	√	√	√	√
J9999	# ziv-aflibercept (Zaltrap)	√	√	√	√	√	√	√
Q0090	# levonorgestrel (Skyla) IUD	√	√	√	√	√	√	√
Q2050	# doxorubicin hydrochloride liposomal doxil (Lipodox)	√	√	√	√	√	√	√
Q2051	# zoledronic acid	√	√	√	√	√	√	√
Q3026	# Interferon Beta-1A (Rebif) ✚				**** N/A	**** N/A	**** N/A	**** N/A
Q4081	# epoetin alfa (Epogen, Procrit)	√	√	√	√	√	√	√
Q4096	# antihemophilic factor (Alphanate)	√	△	△	√	√	√	√
	# Compounded drugs: all	√	√	√	**** N/A	**** N/A	√	√

Not otherwise classified, unspecified, unlisted, miscellaneous CPT or HCPCS services- services will be reviewed prior to claim payment and **may be denied** **as cosmetic, investigational, experimental, unproven, or not medically necessary services.**

*   Non-emergent/urgent requests for benefit review are to be submitted >14 days in advance of the service or as soon as the service is determined to be appropriate by the practitioner. Urgent requests are requests for care or treatment for which a routine application of time periods for making the determination could seriously jeopardize the life or health of the member or the member's ability to regain maximum function or in the opinion of a practitioner would subject the member to severe pain that cannot be adequately managed without the care or treatment that is included in the request.

**   Bariatric surgery candidates must participate in the case management program with PHP's approved designee for a case management evaluation and interventions.

***   Notification must occur at least five (5) business days before surgery is scheduled to occur.

****   **N/A - prior authorization is not required but the service may have a limited benefit, be covered at the non-network benefit level, not be a covered benefit.** For mental health/substance use disorder services for commercial products contact Optum Health @ 800.608.2667. For inpatient mental health/substance use disorder services for Medicaid members contact Community Mental Health.

\#   Medications that are reviewed and processed by the Pharmacy Department.

Services requiring prior authorization must be reviewed in advance of the service even if PHP is a secondary payor.

Δ   Weight management and surgical treatment of obesity is covered for PPO products ONLY with a rider and, if rider is purchased, prior authorization is required.

✚   Covered as a pharmacy benefit only with quantity limits

△ All Home Care Providers must bill claims for Medicaid/FamilyCare, Childrens Special Health Care Services (CSHCS) or MIChild CSHCS to Magellan/Michigan Department of Community Health (MDCH) for the services indicated

	Physicians Health Plan	PHP FamilyCare	PHP FamilyCare MIChild	Physicians Health Plan	Sparrow Physicians Health Network	Sparrow Physicians Health Network	PHP Insurance Company
	Commercial & Federal Employee (FEHB)	Medicaid	MIChild	Self Funded (L0000264; DAS00100, 200, 300)	SPHN (MNA, IUE, UAW & SEIU. DAS00600, 900, 1000, 1200)	SPHN (Non-Union, DAS01100)	PPO

All Home Care Providers must bill claims for Medicaid/FamilyCare, Childrens Special Health Care Services (CSHCS) or MIChild CSHCS to Magellan/Michigan Department of Community Health (MDCH) for the services indicated. MDCH may have authorization requirements. You must contact Magellan at 1-877-864-9014. All other Providers must submit an authorization form to PHP for review. If the request is approved claims are billed to PHP. The PHP billing information is on the member's card.

√ * Check member's identification card to determine who is to be notified of service.