

ICD-10

**Like a New Coding Toy, ICD-10 Has Finally Arrived,
All Shiny and Pretty. Now it's Time to Play!
We Offer a Few Tips to Make the Conversion
a Smooth One for All of Us.**

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MORE USEFUL NEWS
& INFORMATION FOR
PROVIDER PARTNERS

**Working
for Better
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COVER STORY: ICD-10 Rollout

It's Here! Now What?

Some helpful reminders about how ICD-10 works

Now that we've unwrapped this shiny new toy, it's time to play with it! Here are a few reminders from our company to you, our providers, to help utilize ICD-10:

- Dual use of ICD-9 and ICD-10 will not be accepted for the same claim.
- If date of service spans the Oct. 1 implementation date, the claim will need to be split.
- For date of service on inpatient claims that will span Oct. 1, PEHP will take the **discharge** date as determination for ICD-9 or ICD-10.
- DX criteria for preauthorization will be based upon date of service established in the preauthorization. If establishing a preauthorization for services to be rendered post-Oct. 1, the DX code should be code ICD-10.
- PEHP will be following CMS's guidelines for the first 12 months and will not deny claims based solely on the specificity of the ICD-10 diagnosis code as long as a valid code from the same diagnosis family is used.



Want to Test, or Need Help?

We continue to test ICD-10 claims with provider offices who are interested. The only testing offered at this point, is regular file test submissions. We are no longer offering end to end testing.

We are here to assist your office with a smooth transition; feel free to call us if you have any questions or concerns.

If your office is interested in testing claim submission files, please contact either:

- » EDI Department (801-366-7544) or
- » Project Manager, Lance Toms (lance.toms@pehp.org)

If you are currently testing, but have questions, you may contact either:

- » Project Manager, Lance Toms or
- » EDI Manager, Terri Airmet (terri.airmet@pehp.org)

Preventive Coding Update

We have recently updated our Federal Healthcare Reform Coding Table to add ICD-10 codes that are applicable for use in billing preventive visits.

This table is accessible on our website www.pehp.org, in the *forProvider* section under "Claims & Billing" then "Preventive Services."

For service dates prior to Oct. 1, 2015, please use ICD-9 codes. For service dates beginning Oct. 1, 2015, please use only ICD-10 codes. *Claims will not be accepted if there is a combination of ICD-9 and ICD-10 codes on the same claim.*

PEHP Networks

Know the Difference

Recently, we've heard that provider offices enter PEHP member information in their system as the patient having "PEHP." We have four different networks, so it's crucial that your staff enrolls our members with the specific network they have.

Some benefits of ensuring accuracy in the setup:

- » Avoiding denials if your provider is not in-network with the

specific Network.

- » Assists our members in knowing if your provider is in their Network before setting up an appointment.
- » Providing satisfaction to our members, knowing that they are being referred to specialists, facilities etc. in their Network.

For your convenience, copies of the cards can be located on www.pehp.org under the Provider section.

PEHP Networks

PEHP Advantage:

Based primarily around Intermountain Healthcare facilities and practitioners. Includes certain other non-Intermountain Healthcare practitioners and facilities (based on geographic need.) Some plans with this Network do not have out-of-network benefits.

PEHP Summit: Based primarily around University of Utah, IASIS and Mountain Star facilities and practitioners. Includes Primary Children's Medical Center and all rural IHC facilities. Some plans with this Network do not have out-of-network benefits.

PEHP Preferred:

Includes Intermountain Healthcare and non-Intermountain Healthcare facilities and practitioners. Almost all hospitals in the State of Utah participate on this plan. Some plans with this network offer the flexibility to see a non-contracted provider for covered benefits.

PEHP Capital: Primarily centered around IASIS and University of Utah Healthcare facilities and associated practitioners. It includes Primary Children's Hospital and all rural facilities. Some plans with this network do not have out-of-network benefits.

Quality Assurance

Accuracy in Billing & Coding

Our Quality Assurance Department, along with our third party auditing vendor continually audit claims to ensure accuracy of billing and correct coding.

Our third-party auditing vendor reviews the PEHP data with a team of CPC coders, RN's and peer reviews as needed. Examples of common audit referrals to PEHP are:

- » Billing under the wrong provider.
- » Documentation not supporting the codes being billed.
- » Billing for services not rendered.

Please be sure your documentation supports the appropriate codes billed. Remember, if it's not documented it did not happen and is not payable.

If you have any questions or concerns please contact your Provider Relations Specialist.



Provider Responsibilities

When submitting claims, remember your Public Employees Medical Provider Agreement (under section 2) responsibilities:

- » **PROVIDER** agrees to use appropriate procedure and diagnostic codes that most closely identify services rendered to the Member, as defined by the standards of CMS code levels I-III, CPT guidelines, the appropriate corresponding ICD-9-CM or ICD-10 codes.
- » **PROVIDER** acknowledges that claims submitted to PEHP will be subject to PEHP's code auditing product which evaluates code combinations during the processing of claims. PEHP's code auditing determinations are based on nationally recognized and accepted medical coding guidelines and sources.
- » **PROVIDER** agrees to refrain from using any coding scheme that would tend to increase the amount of reimbursement beyond PEHP's Allowable Medical Expense. At the sole discretion of PEHP, any improper, illegal, unprofessional or inflationary coding which misrepresents, distorts, falsely reflects or adversely increases the benefits, may result in termination.

DID YOU KNOW?

If you agree to a reimbursement rate that is lower than the PEHP contracted rate with a member, your office will need to bill the lower rate to PEHP as the billed amount on the claim.

This way, PEHP can properly pay the claim.

Covering Septal Defect Closures

PEHHP covers atrial and ventricular septal defect closure using FDA-approved devices. PEHP does not cover patent foramen ovale closure for persons with cryptogenic stroke, TIAs, arterial emboli due to presumed emboli through a PFO, or migraine prophylaxis.

From UpToDate®, 3/10/15. Treatment of atrial septal abnormalities (PFO, ASD, and ASA) for prevention of stroke in adults, (Messe', SR, Schwartz, RS, Ammash, NM, et al.):

"The effectiveness of percutaneous PFO closure compared with surgical closure or medical management for preventing recurrent embolic events is not established. The best available evidence comes from a systematic review and meta-analysis that identified three randomized controlled trials (CLOSURE I, PC, and RESPECT) and found that device closure of a PFO did not offer a significant benefit over medical therapy for the prevention of recurrent ischemic stroke (risk ratio 0.61, 95% CI 0.34-1.07). Similarly,

other meta-analyses evaluating intention-to-treat data from these three trials found no statistically significant risk reduction for the patient-important outcomes of ischemic stroke recurrence and mortality.

"In summary, three randomized controlled trials have found no significant benefit by intention-to-treat analyses for PFO closure compared with medical therapy, despite point estimates that suggest benefit. The limitations of these trials preclude definitive conclusions. Therefore, additional randomized trial data are still needed to determine whether device PFO closure improves outcomes compared with medical therapy. Eligible patients and clinicians who care for them are strongly encouraged to enroll in ongoing randomized trials to determine the effectiveness of this therapy."

Full "Transcatheter Closure of Septal Defects" policy can be found online through the secured portion of the provider portal, under clinical policies.

Online Claims Tool

Submit Claims to PEHP Electronically

PEHHP is excited to announce our new online claims tool!

With our new EDI requirement now in effect, we are excited to offer this tool for providers that do not submit claims through a clearinghouse. This tool allows a provider to submit an individual claim (no batch claims) to PEHP electronically, free of charge. It is available online, through the secured portion of our website.

Login credentials are required. If you don't have one, contact your Provider Relations Specialist for assistance.

Primary claims submission is available now. *We are working to make COB claim submissions available as soon as possible.*

We look forward to working with you, and making your experience with us even better.

DID YOU KNOW?

We allow paper claim submission(s) for the following:

- » Providers not contracted with any PEHP Networks (aka Out-of-Network Providers)
- » Claims that require medical records (Does not include COB claims)
- » PEHP is the Tertiary Payer

Be Sure to Know the Code

PEHHP continues to receive numerous appeals from anesthesia offices regarding claims they believe were billed correctly. The most common example we've seen is when code 99231 is billed as subsequent days for follow-up care. However, for the type of service rendered, code 01996 would be the more appropriate code to use.

Additionally, we have found that 01996 is being billed on the same day as the surgery. This code is only appropriately billed for subsequent visits. If billed on the same day as the surgery, code 01996 will be denied as included in the anesthesia that was performed on that day.

We encourage your office to review the CPT Coding Guidelines and documentation requirements, to ensure accuracy with the chosen codes, when submitting claims to PEHP.

Code Descriptions

CPT book code descriptions:

- » 99231 – *Subsequent hospital care, per day, for the evaluation and management of a patient, which requires at least two of these three components: A problem focused interval history; A problem focused examination; Medical decision making that is straightforward or of low complexity.*
- » 01996 – *Daily management of epidural or subarachnoid drug administration.*

Keeping Providers Informed

Changes, Reminders From

We like to keep our provider community updated on the changes within PEHP. Here are a few updates we would like you to be aware of:

BENEFIT CHANGES TO PHYSICAL AND OCCUPATIONAL THERAPY:

- » As of September 1, 2015, PEHP will allow a maximum of 20 office-based combined PT and OT visits per plan year. **Prior authorization is no longer required.**
- » Jordan School District requires prior authorization after 12 visits of combined OT/PT.

POLICY CHANGES:

- » Urology – PEHP now covers Urolift.
- » Neurosurgery – PEHP covers Mobi-C for level 1 and 2.

- » Wound Care – PEHP covers EpiFix for specific indications.
 - › Reminder: SNAP vac is not covered.
- » Effective Oct. 1, 2015, PEHP will no longer cover MicroArray testing for autism. We will, however, continue to cover MicroArray testing for severe intellectual delay and multiple congenital malformations for diagnostic purposes.

All of the services mentioned above under Policy Changes require prior authorization.

REMINDERS:

- » Prior authorization is required for **ALL GENETIC TESTS.**
- » Prometheus Laboratories and Millennium Laboratories are non-covered facilities. Remicade level should be done through ARUP.

DID YOU KNOW?

Providers can find out if a code requires prior authorization online under Fee Schedule Lookup, through the secured portion of our website.

MAC Coverage for Preventive Colonoscopies

In accordance with the Federal Healthcare Reform, PEHP provides coverage for several preventative services including screenings for colorectal cancer for adults starting at age 50 through ages 75.

PEHP has specific criteria that must be met for PEHP to cover Monitored Anesthesia Care (MAC) during a colonoscopy and other gastrointestinal procedures. The criteria can be found in PEHP's *Anesthesia Services for Gastrointestinal Procedures* policy that is



available through the secure provider portal.

Patients who meet the criteria for both MAC and the preventative screening guidelines will have the MAC covered at 100% of the PEHP allowed benefit. If the member does not meet MAC coverage criteria, the anesthesia will be completely denied.

We encourage gastroenterologist and anesthesiologists to discuss these items with members so that they are aware of their coverage limitations when getting gastrointestinal procedures.

PEHP Clinical Services

- » Sleep Study for Obstructive Sleep Apnea:
 - › All PSGs require prior authorization
 - › Attended, in-facility PSGs are covered only if members have comorbidities that prevent a home PSG to be done adequately such as:
 - » Moderate to severe pulmonary disease (for example: COPD or asthma with nocturnal oxygen use or daytime hypercapnea with documented arterial blood gasses showing pO₂ less than 60 or pCO₂ greater than 45);
 - » Neuromuscular disease (e.g., Parkinson's disease, spina bifida, myotonic dystrophy, amyotrophic lateral sclerosis);
 - » Stroke;
 - » Epilepsy;
 - » Congestive heart failure (NYHA class III or IV or LVEF less than 45%);
 - » Super obesity (BMI greater than 45, or pulmonary function studies show obesity hypoventilation syndrome; BMI greater than 35 plus arterial blood gas with pCO₂ greater than 45, or BMI greater than 35 plus inability to lie flat in bed);
OR
 - » Member has one or more of the following comorbid sleep disorders:
 - › Periodic limb movement disorder,
 - › Parasomnias,
 - › Narcolepsy,
 - › Central sleep apnea or complex sleep apnea.
- For a complete policy, please refer to secured provider site.*

DID YOU KNOW?

Patients should not be asked for full payment at the time of service, once coverage with PEHP has been verified. They can, however, be asked for copayments, deductibles and coinsurance.

Diabetes Resources

Effort and Education for

Whether your patients have been living with diabetes for some time or have only recently been diagnosed, it may interest you to know that PEHP offers valuable educational resources to help them better manage their A1C, blood pressure, and cholesterol levels. PEHP members are encouraged to take the first step by discussing their biometric target levels with their physician based on their medical condition.

PEHP is committed to providing information and resources for your patients – our members – and help them to improve their health status.

As providers, you understand that knowledge can be one of the best tools a patient can have to effectively manage their diabetes. PEHP resources for diabetes include:

» **Enhanced Pharmacy Benefit** – Enrolled members may reduce their co-pay for



diabetic medications and supplies.

» **PEHP Healthy Utah Diabetes Management Rebates** – Eligible members may earn up to \$300 in rebates per year for taking steps to actively

DID YOU KNOW?

All PEHP participating providers and facilities agree, per Provider Agreement, to bill PEHP directly within one year of the date of service for covered services provided to their PEHP patients.

‘Diabetes and YOU’ Fall Class

Almost 30 million children and adults in the United States have diabetes. Healthcare costs are 2.3 times higher for those individuals compared to people without the disease.

Proper diabetes management is critical for daily aspects of wellness, prevention of diabetes complications, and for managing personal healthcare finances.

To help PEHP members with diabetes or pre-diabetes obtain knowledge, understanding and helpful resources, PEHP Healthy Utah offers the “Diabetes and YOU” class.

This four-week educational series is conveniently offered via webinar and email, and provides information on the basics of diabetes, nutrition, physical

Better Care

manage their condition.

- » **PEHP Waist Aweigh Weight Management Program** – Eligible members with a BMI of ≥ 30 may enroll for health coaching support, education, and rebates to help them reach weight loss goals.
- » **Diabetes and YOU classes** – Email and webinar-based classes facilitated by PEHP Registered Dietitians helping eligible members to better manage their diabetes and improve health.
- » **“Take Charge” Diabetes Self-Management Email Group** – Eligible members may subscribe and receive practical tips and support to create healthy habits, moderated by PEHP Registered Dietitians.

By coordinating our efforts and educating those we serve, providers and insurers can partner and offer better care.

The PEHP mission emphasizes a partnership of trust with a commitment to value, innovation, and excellence. We invite you and your office staff to learn more about PEHP diabetes resources by visiting www.pehp.org/members/diabetes.

Starting Soon

activity and ways to prevent complications.

Our members will enjoy learning from PEHP’s registered dietitians, Maria Givler and Jill Bryan.

The next class is offered Oct. 5th through 30th. If you or your patients are interested in learning more about Diabetes and YOU classes, contact maria.givler@pehp.org.

Autism Services

Changes to Credentialing Coming Soon

Beginning Nov. 1, 2015, your PEHP Provider Relations Specialist will begin accepting credentialing requests from Physician and PhD Mental Health Providers who have an additional certification as an Applied Behavior Analyst and who wish to be covered providers for Autism services.

PEHP will amend contracts for eligible providers to include the reimbursement rates and define covered Autism services. Until the certification has been verified and the agreement amended, providers having the additional certification will not be eligible to provide covered Autism services for any PEHP eligible members.

This benefit change will go into effect for employer groups who have Autism Benefits upon their 2016 plan year renewal date. Employer groups may have different age restrictions and/or eligibility for ABA services.

Please check with PEHP Customer Service for each PEHP member’s benefits and to see if preauthorization is required.

DID YOU KNOW?

Checking eligibility, claim status, obtaining remittance advices and much more, can be accomplished by logging into the secured provider portion of www.pehp.org or through EDI transactions through UHIN. Login credentials are required to visit the PEHP website. If you have not signed our ETPA Agreement, download it from our website under FOR PROVIDERS; Online Services; Download ETPA Agreement. The executed document can then be faxed to your Provider Relations Specialist.

Welcome Susan Poulos, RN

Introducing new Financial Assurance RN

We welcome Susan Poulos, RN, who has recently joined the Financial Assurance Department as the new Financial Assurance RN. Previously, she worked as an RN Case Manager in our Clinical Services Department for five years.

Susan has been a Registered



Nurse for 35 years and has a vast nursing background covering direct patient care, patient care coordination, health care quality improvement & program development.

Originally from the Midwest, Susan has lived in and enjoyed the beauty of Utah for 34 years.

Credentialing

Policy Update

PEHHP recently updated our credentialing policy. The update further defines and clarifies PEHP's policy for mid-level provider supervision and billing. The following was added to our policy:

To bill services under a supervising physician as providing direct supervision over the services, PEHP requires both of the following criteria to be met:

- 1) The mid-level provider must follow Medicare's incident-to guidelines and*
- 2) The supervising physician must be present in the same building as the mid-level provider at the time the service is performed.*

The supervising physician needing to be present in the same building as a qualification that would allow a mid-level provider to bill under a supervising provider is a new requirement of PEHP.



We will not begin to enforce or audit this billing practice until Jan. 1, 2016.

PEHP continues to audit and review claims to ensure that Medicare's "Incident-to" guidelines are being followed. We continue to find providers that are not correctly following these guidelines. We invite you to review the guidelines in CMS's manual at: <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/bp102c15.pdf>.

PEHP's full credentialing policy can be reviewed on our website, www.pehp.org under the contracts/credentialing section of the *for Providers* website.

DID YOU KNOW?

PEHP offers a prenatal and postpartum program, known as WeeCare. It's designed to help expectant mothers have a safe and healthy pregnancy.

Provider Relations Representatives

To provide optimal service to PEHP providers, each Provider Relations Representative is assigned a specific area to manage. This assignment is based on the physical locations of the providers. If you are unsure who your representative is, please call PEHP at 800-365-8772 or 801-366-7700.

SERVICE AREA #1

Chantel Lomax

Provider Relations Specialist

Phone: 801-366-7507 or 800-753-7407

Fax: 801-245-7507

E-mail: chantel.lomax@pehp.org

In-State Cities

Draper (84020), Holladay (84117, 84121 & 84124), Midvale (84047), Salt Lake City, Sandy (84070, 84090, 84091, 84092, 84093 & 84094)

Out-of-State

Colorado

SERVICE AREA #2

Wendy Philbrick

Provider Relations Specialist

Phone: 801-366-7753 or 800-753-7753

Fax: 801-245-7753

E-mail: wendy.philbrick@pehp.org

In-State Counties

Box Elder, Cache, Davis, Morgan, Rich, Summit, Weber

In-State Cities

Murray (84107, 84123 & 84157)

Out-of-State

Arizona, Idaho

SERVICE AREA #3

Henry Cruz

Provider Relations Specialist

Phone: 801-366-7721 or 800-753-7721

Fax: 801-245-7721

E-mail: henry.cruz@pehp.org

In-State Counties

Carbon, Daggett, Duchesne, Emery, Juab, Millard, Sanpete, Tooele, Uintah, Utah, Wasatch

In-State Cities

Herriman (84065 & 84096), Kearns (84118), Magna (84044), Riverton (84065, 84095 & 84096), South Jordan (84065 & 84095), Taylorsville (84084, 84118 & 84119), West Jordan (84084 & 84088), West Valley (84119, 84120 & 84128)

Out-of-State

Wyoming

SERVICE AREA #4

In-State Counties

Beaver, Garfield, Grand, Iron, Kane, Piute, San Juan, Sevier, Washington, Wayne

Out-of-State Cities

Las Vegas, Nevada
Mesquite, Nevada

SERVICE AREA #5

Selena Johnson

Provider Data Specialist

Phone: 801-366-7511 or 800-753-7311

Fax: 801-245-7511

E-mail: selena.johnson@pehp.org

Out-of-State

All states other than those listed above

MAILING ADDRESSES

PEHP
560 East 200 South
Salt Lake City, UT 84102



560 East 200 South | Salt Lake City, UT 84102-2004

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Contact List

Please note: *The contact numbers for Case Management, Preauthorization and Customer Service are not the same.*

Case Management

.....801-366-7755 or 800-753-7490

Customer Service/ Pre-authorization (outpatient)

.....801-366-7555 or 800-765-7347

EDI Helpdesk

.....801-366-7544 or 800-753-7818

Inpatient Preauthorization

.....801-366-7755 or 800-753-7490

Inpatient Mental Health & Substance Abuse Authorization

Blomquist Hale Consulting Group (BHCG)
Jordan School District

.....801-262-9619 or 800-926-9619

Pharmacy

.....801-366-7551 or 888-366-7551

Wellness Program

.....801-366-7300 or 855-366-7300

PEHP Healthy Utah.....801-366-7300 or 855-366-7300

PEHP Waist Aweigh.....801-366-7300 or 855-366-7300

PEHP QuitLine.....855-366-7500

PEHP WeeCare

.....801-366-7400 or 855-366-7400

Provider Relations

.....801-366-7557 or 800-677-0457

Henry Cruz.....801-366-7721 or 800-753-7721
Provider Relations Specialist henry.cruz@pehp.org

Chantel Lomax.....801-366-7507 or 800-753-7407
Provider Relations Specialist chantel.lomax@pehp.org

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Provider Relations Specialist wendy.philbrick@pehp.org

Selena Johnson.....801-366-7511 or 800-753-7311
Provider Data Specialist selena.johnson@pehp.org

Jackie Smith.....801-366-7795 or 800-753-7595
Provider Relations Analyst jackie.smith@pehp.org

Laurel Rodriguez.....801-366-7350 or 800-753-7350
Provider Relations Manager laurel.rodriguez@pehp.org

Cortney Larson.....801-366-7715 or 800-753-7715
Director of Provider Relations cortney.larson@pehp.org

PEHP Website

.....www.pehp.org
PEHP Quitline.....www.pehp.quitlogix.org