

# ONE FOR ALL

**Our New Provider Basics Document Will Help Eliminate Gray Area for Providers and Patients**

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**COVER STORY: Provider Basics Document**

# Upgrade to Basic

*New Tool is All-in-One Resource for You, Patients*

**W**e understand that it can be difficult to work with many payers in regards to different drug formularies, what requires authorization, benefit limits, exclusions, etc.

To assist you, we have created a new **Provider Basics** document that highlights the items that most commonly lead to a service not being covered.

We have included as a separate document with this newsletter our **Provider Basics** tool. Its purpose is to highlight the most common areas in which we have limits, authorizations or other benefit differences with other payers so that we can make working with PEHP easy.

We want to help our members, your patients, avoid unexpected denials or balance bills, as well as out-of-network referrals, a lack of preauthorization, or benefit limits or exclusions.

The **Provider Basics** document provides information on networks, our Preferred Drug List, the Affordable Care Act (ACA), labs and imaging, preauthorization, benefit exclusions, as well as tips for specific provider specialties to identify items that often lead to denials.

We have posted the documents on our website and will keep them updated so you can have a tool to guide you on how to help your PEHP patients maximize their benefits.

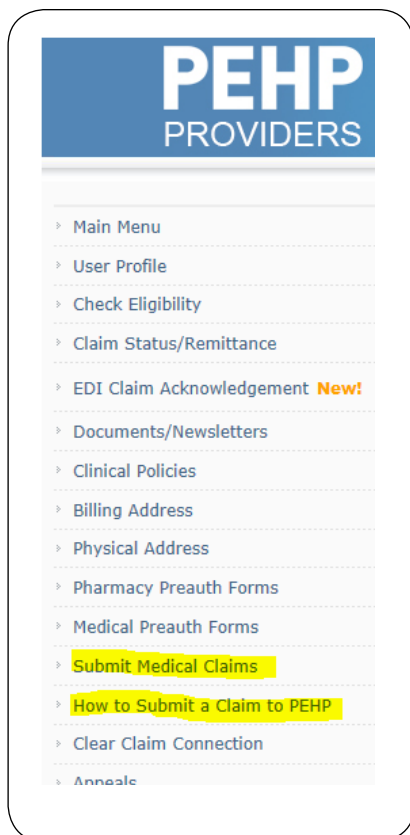
Please let us know if there is information your office feels we can add to this document to further our effort to include as much important information together as possible in one document. Our goal is to make working with us easy and efficient.



**Online Claims Tool**



# Fast, Efficient, and Free Filing



**I**n our continuing efforts of going paperless and our EDI mandate, we want to remind you that your office has the ability to enter individual electronic claims directly online at [www.pehp.org](http://www.pehp.org), free of charge.

After logging in to the *forProviders* section of our website, choose “Submit Medical Claims” from the menu choices and follow the prompts. To further assist your office, we have created a video tutorial in case you have questions. The tutorial can be found by choosing “How to Submit a Claim to PEHP” from the menu choices (at left).

Additionally, you can view “EDI Claim Acknowledgement” reports (i.e. claim accepted / rejected), check claim status and view and/or print remittance advices from the menu options.

We value our partnership with our providers in the community and welcome any feedback on how our website can be more useful to you.

## DID YOU KNOW?

*PEHP Customer Service is happy to assist with benefit questions, complicated claims, prior authorization questions at 801-366-7555. For patient eligibility, simple claim status, prior authorization forms, login at [www.pehp.org](http://www.pehp.org).*

**EDI Claim Acknowledgement**

**Rejected vs. Received Claims**

**O**ur new EDI Claim Acknowledgement (277CA) tool is available online through the secured portion of the provider site.

This tool allows providers to see if electronically submitted claims were rejected and why and/or verify that we have received the claim.

Typically, if you are submitting your claims electronically, your clearinghouse should provide the 277CA.

To view the report, login with your online credentials at [www.pehp.org](http://www.pehp.org). On the left side, select "EDI Claim Acknowledgement." A submission beginning and ending date are required. If you are looking for a specific member and date

Subscriber ID	Patient Name	Date of Service	Billed Amount	Status
1741000123789	Smith, Jane	10/27/2015	30.00	Rejected.A3:71
1741000123456	Smith, James	01/13/2016	123.00	Rejected.A3:71
1741000123456	Smith, James	01/14/2016	49.00	Rejected.A3:71
1741000123499	Jones, Kylie	02/03/2016	119.00	Rejected.A3:88
1741000123456	James, Rick	02/11/2016	431.00	Rejected.A3:88
1741000123456	Smith, James	02/17/2016	119.00	160226100159
1741000123456	Smith, James	02/18/2016	1407.00	160226100160
1741000123456	Smith, James	02/22/2016	1168.00	160226100161

of service, you are able to add that information as well.

Keep in mind, if you don't have specifics, just add the dates and hit "view results."

If the claim was rejected or received, you will see it under the "status" field. (Sample above)

**Claim Rejected:** In order to see why the claim was rejected, simply click on the red line. A box will appear, giving you the definition of the rejection

code and why the claim was rejected.

» Lists of rejection codes are available by going to <http://www.wpc-edi.com/reference>.

**Claim Accepted:** PEHP claim number will appear in blue. To view the claim, click on the number and a box will appear, giving you information about that specific claim.

We believe you'll be pleased with how fast, easy and convenient it is for your office.

**DID YOU KNOW?**

Hospital fee schedules can be complex, so this information is not available online.

Contact your Provider Relations Specialist for assistance.

**Coordination of Benefits**

**COB Information Now Available Online**

**W**e appreciate input from providers and are excited to announce that you now have the capability of obtaining COB (Coordination of Benefit) information online.

It is located in the "Check Eligibility"

menu option when you log into the "forProviders" section at [www.pehp.org](http://www.pehp.org).

We believe this will help with your daily tasks and we encourage you to take advantage of this new enhancement.



**PEHP Provider Relations**

# Welcome Jenna Murphy

**P**lease join us in welcoming Jenna Murphy to the PEHP Provider Relations Team!

Jenna has a degree in Health Promotion and Nutrition Education from Weber State University, and comes to us from the PEHP Healthy Utah Department. She worked for 5 years in a provider's office as a medical assistant and with client relations and billing, so she knows her way around a doctor's office.



She owns a Curves gym, which is in the good hands of a fantastic staff, and owns and oversees several rental properties. She loves running, hiking, biking – basically taking advantage of the beautiful place where we live. She and her husband love music, movies, travel and any opportunity to spend time with friends.

She is excited to join the Provider Relations team and looks forward to working with providers.

**Online Tools**

## No Login for Preauth Forms

**I**n our continued efforts to assist providers on a daily basis, we're happy to inform you that you no longer have to login to obtain PEHP's medical preauthorization forms. These forms are now located on the unsecured provider site on [www.pehp.org](http://www.pehp.org).

Once you've successfully gone on our website, simply click on "Download Medical Preauthorization Forms" on the right hand side. Once completed, providers can send the form along with the applicable documentation back to PEHP's Case Management Department at 801-328-7449

The forms can be mailed as well. If you have a question on the preauthorization request, call us at 801-366-7555.

The screenshot shows the PEHP website interface. At the top, it says 'PEHP Health & Benefits' and 'PROUDLY SERVING UTAH PUBLIC EMPLOYEES'. Below the navigation bar, there are sections for 'Providers' and 'Provider Login'. A callout circle highlights a button labeled 'Download Medical Preauthorization Forms' on the right side of the page. Another callout circle at the bottom highlights a link that says 'Find the right form to get preauthorization for your patient. See All Forms.' The website also features a 'CORE' logo.

**DID YOU KNOW?**

*Both providers and members may submit a confidential and anonymous fraud report by clicking "About PEHP, How to Report Fraud", at [www.pehp.org](http://www.pehp.org). You can also generate a report by calling our 24-hour confidential hotline at 888-475-8376.*

**Physical Activity**

# Exercise is Medicine –

**A**s healthcare costs continue to increase, getting your patients to engage in more physical activity may be one of the best solutions for improving their health outcomes.

As a healthcare professional, you are in a unique position to counsel your patients on developing active lifestyles. Your discussion, encouragement and guidance regarding their current level of physical activity may have the greatest influence on their decision to be physically active.

Research continues to show physical activity provides greater benefits to multiple health factors than any single pill. Based on this research, healthcare



providers are urged to consider discussing and recommending physical activity to their patients.

**Code Changes**

## Under Review: Don't Let This

**A**t PEHP, we feel a deep responsibility to help our members avoid billing surprises that can cost them significant amounts.

To this end, we have begun reviewing the claims of our in-network providers to determine whether they come within a distinct minority of providers.

As a result of this review, we have recently placed messages on some provider profiles on PEHP's Provider Look-up Tool for two reasons — either not obtaining preauthorization, and/or referring our members to out-of-network providers more than 5% of the time.

Files are reviewed approximately every 30 days to determine if practice patterns

have changed. Messages will be removed and added at these intervals. A letter will be sent to the address on file for the provider for each appearance on the report. Messages will automatically be removed with no notice if practice has improved.

To find out if you have a message, go to PEHP.org, click on "Find a Provider" in the lower left of the screen, choose any of the networks under which you are contracted, and search by name.

If there is no message preceded by an exclamation point, you are doing well by our members in relation to these issues and we both thank you very much!

If you have a message and would like to

**DID YOU KNOW?**

*Providers are encouraged to check PEHP's Provider directory. If changes need to be made, providers need to be added/removed from location, notify your Provider Relations Specialist.*

# Are You Prescribing it?

Assessing a patient's current physical activity level can be as simple as asking two simple questions: How many days during the week do you exercise, and for how many minutes? The assessment of their physical activity levels allows you to initiate the discussion, highlights the importance of physical activity for disease prevention and management, and enables your healthcare team to monitor changes over subsequent medical visits.

Encourage your patients to achieve at least 30 minutes of exercise 5 days a week or a total of 150 minutes of moderate intensity activity per week.

Research also shows that physicians who are more physically active are more likely to counsel patients regarding physical activity. Be an example of physical activity, by being active yourself.

For future reference, you and your patients can visit the EIM website at [www.exerciseismedicine.org](http://www.exerciseismedicine.org), where you will find additional resources on how to prescribe exercise as medicine and find flyers you can print and display in your waiting rooms and office regarding the importance of physical activity.

## Happen to You!

find out the details behind it and how to get it removed, please contact the Provider Relations Specialist for your territory in the back of this newsletter.

Our purpose is to work with both members and providers on these issues. If you have a message, we want to partner with you to remove it. We know how difficult it can be to work with different health plans with different requirements.

We clearly want to streamline processes and give you the information you need to protect our members from billing surprises and invite your input on how we can do better.

### Examples of Messages Members Will See

*PEHP's experience suggests that this provider may be more likely than others to refer you to an out-of-network provider. Depending on your plan, out-of-network services may not be covered or may cost you much more out-of-pocket. Help protect yourself by (1) becoming familiar with PEHP in-network labs and imaging services and requesting they be used and (2) never assuming that your provider knows which labs, imaging services, specialists (including anesthesiologists), or facilities are in-network — make sure you do before you say yes.*

*PEHP's experience suggests that this provider may be less likely than others to obtain prior authorization for a test or treatment when required — which can result in you being responsible for 100% of the bill. Help protect yourself by (1) checking online or with PEHP to determine if a test or treatment requires prior authorization, (2) working with your provider to make sure a prior authorization request is submitted, and (3) checking PEHP's online message center to see if your prior authorization has been granted.*

### DID YOU KNOW?

*To assist the providers in our community understand ACA benefits, a Federal Healthcare Reform Coding table is available at [www.pehp.org](http://www.pehp.org), Providers, Claims & Billing, and Preventative Services.*

**Coding**

# Accurate Coding & Documentation

**O**ur Auditing Department continually audits claims to ensure accuracy of billing and correct coding. We follow the American Medical Association (AMA) Current Procedural Terminology (CPT) codebook for their rules and guidelines. We also use Verscend (a third-party auditing vendor) that helps with the reviews. Verscend consists of a team of CPC coders, RNs and peer reviews, when needed.

One purpose of our audits is to determine if the documentation supports the codes being billed; or if there is a more appropriate code that describes the services.

The AMA CPT Code book states: *“Select the name of the procedure or service that accurately identifies the service performed.”*

**Example:**

- » **Case:** A patient is seen for review of their medications for a psychological condition.
- » **Coding:** It would not be appropriate to bill an E&M code when there are codes that more accurately describe this service in the Medicine tab under the Psychiatry codes section.

When submitting claims, Providers have agreed to:



- » Use appropriate procedure and diagnostic codes that most closely identify services rendered to the Member.
- » Having claims submitted to PEHP subjected to PEHP’s code auditing product, which evaluates code combinations during the processing of claims.
- » Refrain from using any coding scheme that would tend to increase the amount of reimbursement...
  - » For the full agreement, refer to section 2 of your Public Employees Medical Provider Agreement.

A key to coding is to remember that 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.

## ICD-10 Specificity Begins October 1

**T**he one-year grace period for ICD-10 coding specificity has ended. Beginning October 1, 2016, PEHP will follow CMS in requiring that the highest level of specificity of ICD-10 diagnosis

codes be billed on claims. Failure to do so will result in the denial of the claim. We encourage you to review the ICD-10 codes being billed so your claims are not denied.

**DID YOU KNOW?**  
 Payments can be deposited directly into your bank account. Login today at [www.pehp.org](http://www.pehp.org) and complete the EFT Enrollment.



*For Your Information***Keeping You Informed on PEHP Policies****Migraine Headache Procedures**

PEHP considers these procedures investigational for the treatment of cluster headaches, chronic daily headaches and migraines because their effectiveness has not been established in the medical literature:



1. Decompression or resection of the greater occipital, supra-orbital and supra-trochlear nerves
2. Occipital nerve stimulation or block
3. Ganglionectomy, sphenopalatine ganglion block
4. Trigger point injections
5. Suboccipital and supraorbital nerve stimulation or block

For a complete list of non-covered procedures, please refer to PEHP policy “Headaches: Invasive Procedures” on our website.

**Genetic testing for Autism Spectrum Disorder**

PEHP considers genetic testing medically necessary to establish a molecular diagnosis of an inheritable disease when all of the following are met:

- » The member displays clinical features, or is at direct risk of inheriting the mutation in question (pre-symptomatic); and
- » The result of the test will **directly impact** the treatment being delivered to the member; and

» After history, physical examination, pedigree analysis, genetic counseling, and completion of conventional diagnostic studies, a definitive diagnosis remains uncertain.

Because autism spectrum disorder is diagnosed based upon psychological testing and symptomatic behavior, PEHP considers Microarray testing medically indicated only if the patient has moderate to severe developmental delay/intellectual disability or multiple congenital anomalies not specific to a well-defined genetic syndrome.

PEHP considers FMR1 gene mutation for Fragile X syndrome medically indicated in the presence of either dysmorphic features or mental disability and MECP2 gene mutation indicated when Rett’s disorder is suspected.

**All genetic tests require**

**preauthorization** and have to be performed through contracted laboratories when possible to prevent balance billing for our members. PEHP has no contract with **Lineagen** or **Myriad Genetics**.

**Hammer Toe Surgery**

PEHP considers fixation implants (e.g., the Acumed Hammertoe Fusion Set, the BME Hammerlock Implant, the Futura Flexible Digital Implant, the Futura LMP Lesser Phalangeal Joint Implant, the Pro-Toe Hammertoe Implant, the Smart Toe, the BioFoam Wedge System, the StayFuse Fusion Device, and the Weil-Carver Hammertoe Implant) experimental and investigational for hammertoe repair because of a lack of evidence of effectiveness and safety in the peer-reviewed published medical literature.

**DID YOU KNOW?**

*WeeCare is a pregnancy program provided to support and educate PEHP expectant mothers to have the healthiest, safest, most enjoyable pregnancy possible.*

**Pharmacy**

# PEHP's Preauthorization Updates

**P**EHHP chooses specific prescription drugs and specialty medications to require preauthorization. These specific prescription drugs and specialty medications are chosen because of:

- » the high potential for adverse reactions, contraindications, misuse, and safety issues;
- » the opportunity to use first line therapy;
- » cost.

To begin, obtain preauthorization forms, located on the right hand side at [www.pehp.org](http://www.pehp.org), under for *Providers*.

Questions? Contact your Provider Relations Specialist or call Customer Service at 801-366-7555 or 800-765-7347. Members may call Customer Service for status of the provider's request.

Approval or denial will be communicated to the provider's office. Preauthorization does not guarantee payment and coverage is subject to eligibility, benefit coverage, and preauthorization requirements.

## No Coverage for Compound Hormones

**W**e've recently had inquires about the use of compound hormones, which PEHP does not cover.

PEHP's policy on not covering compounding hormones is supported by current scientific studies including a recent article published in the April 2016 *Journal of Endocrine Society* entitled "Compound Bioidentical Hormones in Endocrinology Practice: An Endocrine Society Scientific Statement."

The article summarizes that through

### Drugs REMOVED from List

Drug Name	Effective Date
Latuda	July 1, 2015
Neupogen	January 1, 2016
Velcade	January 1, 2016
Makena	January 1, 2016
Ampyra	January 1, 2016
Lamisil Granules	March 1, 2016

### Drugs ADDED to List

Drug Name	Effective Date
Nucala	March 1, 2016
Epclusa	July 1, 2016
Cabometyx	July 1, 2016
Methadone	July 1, 2016
Fentanyl	July 1, 2016

PEHP's Preferred Drug List is updated several times a year and contains the most current preauthorization list, in addition to other lists that affect pharmacy choices. Find it at [www.pehp.org](http://www.pehp.org).

trials, the availability of FDA-approved bioidentical hormones produced in monitored facilities provides high quality of safety and efficacy. Therefore, there's no rationale for routinely prescribing unregulated, untested, and potentially harmful custom-compounded bioidentical HTs.

Providers are encouraged to prescribe FDA-approved hormone products and to avoid custom-compounded hormones.

Reference: J Clin Endocrinol Metab, April 2016, 101(4): 1318-1343

## DID YOU KNOW?

PEHP participating providers, including physicians, other healthcare professionals 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.

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

### 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**

Holladay (84117, 84121 & 84124), Midvale (84047), Salt Lake City (all other zips codes not mentioned in other service areas), All University of Utah

**Out-of-State**

Colorado

### 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 Cities**

Kearns (84118), Magna (84044), Taylorsville (84084, 84129 & 84119), West Jordan (84084 & 84088), West Valley (84119, 84120 & 84128)

**In-State Counties**

Tooele, Utah

**Out-of-State**

Wyoming

### 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

### 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, Weber

**In-State Cities**

Murray (84107, 84123 & 84157)

**Out-of-State**

Idaho

### SERVICE AREA #4

**Jenna Murphy**

Provider Relations Specialist

*Phone:* 801-366-7419 or 800-753-7419

*Fax:* 801-328-7419

*E-mail:* jenna.murphy@pehp.org

**In-State Cities**

Draper, Herriman (84065 & 84096), Riverton (84065, 84095 & 84096), Sandy (84070, 84090, 84091, 84092, 84093 & 84094), South Jordan (84065 & 84095)

**In-State Counties**

Beaver, Carbon, Daggett, Duchesne, Emery, Garfield, Grand, Iron, Juab, Kane, Millard, Piute, San Juan, Sanpete, Sevier, Summit, Uintah, Wasatch, Washington, Wayne

**Out-of-State Cities**

Las Vegas, Nevada  
Mesquite, Nevada

**Out-of-State**

Arizona

### MAILING ADDRESSES

PEHP  
560 East 200 South  
Salt Lake City, UT 84102

**PROVIDER NEWS**  
A PEHP PROVIDER RELATIONS PUBLICATION PEHP FALL 2016

# 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  
.....www.pehp.quitlogix.org

**PEHP WeeCare**

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

**Provider Relations**

.....801-366-7557 or 800-677-0457  
Chantel Lomax .....801-366-7507 or 800-753-7407  
Provider Relations Specialist chantel.lomax@pehp.org  
Henry Cruz .....801-366-7721 or 800-753-7721  
Provider Relations Specialist henry.cruz@pehp.org  
Jenna Murphy .....801-366-7419 or 800-753-7419  
Provider Relations Specialist jenna.murphy@pehp.org  
Wendy Philbrick .....801-366-7753 or 800-753-7753  
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