# PROVIDER NEWS
## A PEHP PROVIDER RELATIONS PUBLICATION
### PeHP  SPRING 2015

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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
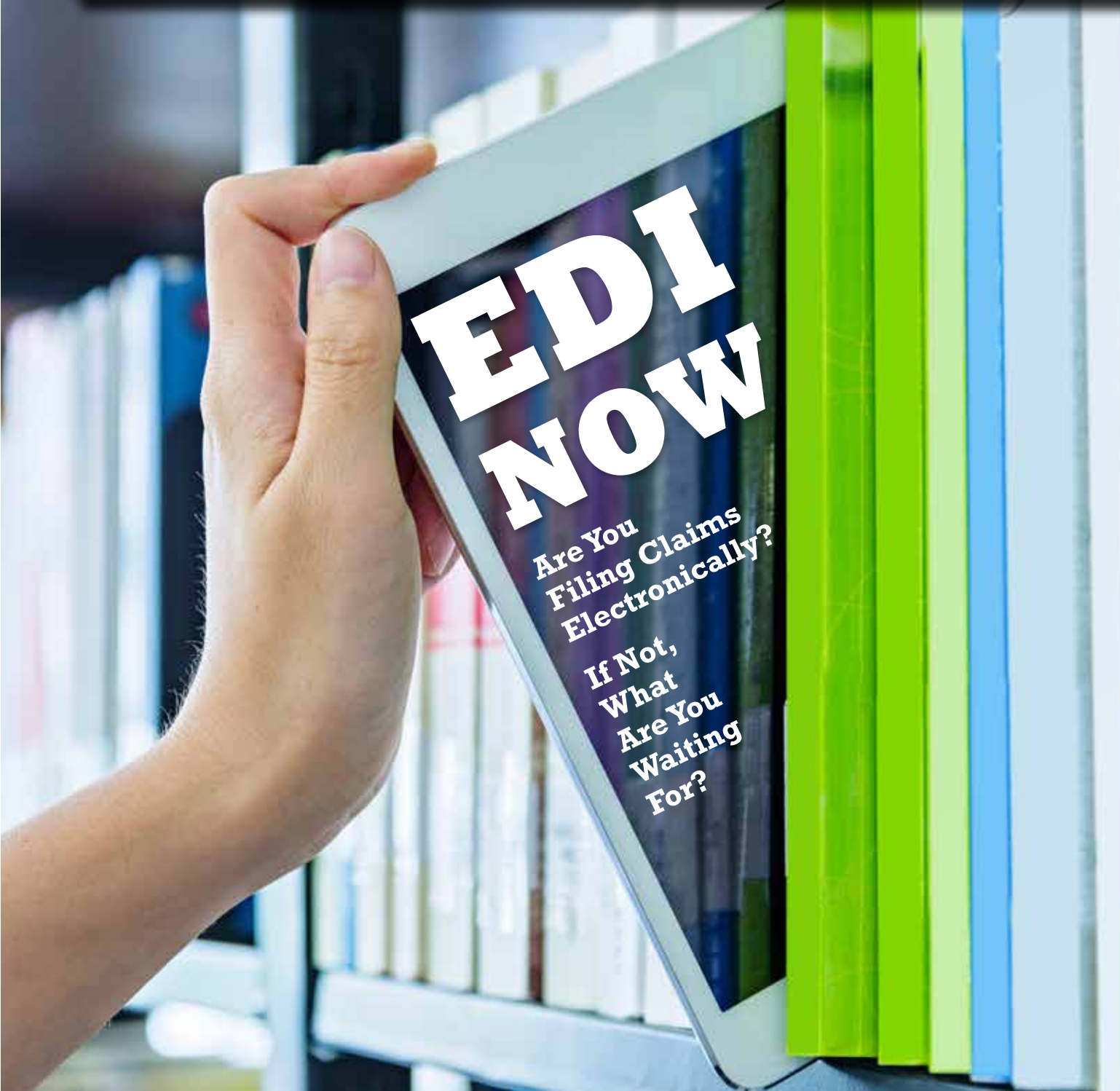
### Inpatient Mental Health
### & Substance Abuse Authorization
Blomquist Hale Consulting Group (BHCG)
*Canyons School District*
*Jordan School District*
. . . . . . . . . . . . . . . . . . . . . . . . . .801-262-9619 or 800-926-9619

### 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

Glenda Lowe . . . . . . . . . . . .801-366-7496 or 800-950-4877
Client Liaison                 glenda.lowe@pehp.org

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

Angel Macas . . . . . . . . . . . .801-366-7721 or 800-753-7721
Provider Relations Specialist          angel.macas@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
PEHP Quitline . . . . . . . . . . . . . . www.pehp.quitlogix.org

4/17/15

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# EDI NOW

## Are You Filing Claims Electronically?

## If Not, What Are You Waiting For?

## INSIDE
MORE USEFUL NEWS
& INFORMATION FOR
PROVIDER PARTNERS

### ICD-10 Code Tips for Transition
» PAGE 6

### PEHP Healthy Utah Is On The Move
» PAGE 7

*COVER STORY: EDI / EFT Requirement*

# Paperless yet?

## Reminder: Claims Should be Submitted Electronically

In case you've forgotten, PEHP no longer accepts paper medical claims. These claims are required to be submitted via Electronic Data Interchange (EDI).

If your office is already submitting claims EDI, but aren't getting through to us, contact our EDI helpdesk or your Provider Relations Specialist. We will need to know your TIN, providers in the group and the clearinghouse being utilized.

Not currently set up? Contact your practice management software; clearinghouse or UHIN to get started.

**Coming Soon!!** PEHP will have a claims tool online through the secured portion of our website which will enable providers to submit their claims electronically. The tool is designed to support individual claim submissions and is not designed for batch claim submissions.

Please be aware, a few exceptions for paper claims are allowed. They are:

» Out of network and/or contracted out of state providers;

» Providers not contracted with any PEHP Networks;

» Claims that require medical records – **Note: This does not include COB claims**; or

» If PEHP is the tertiary payer.

Additionally, as of January 1, 2015, PEHP requires all contracted providers to sign up for Electronic Funds Transfer (EFT). Your office can simply sign up by logging in with your User ID and Password to the secured provider portion on pehp.org. If you don't have a login, contact your Provider Relations Specialist.

If you haven't signed up for either function, we encourage you to do it as soon as possible to keep your office moving smoothly!

## Avoiding Rejections for

Ever find yourself spending countless hours dealing with rejections of your EDI claims? Because of avoidable errors, PEHP rejects 4% of electronic claims per day. Let us offer some guidance to help get your claims through the first time!

A few top reasons claims get rejected:

» Invalid Subscriber ID

» Incorrect DOB (Date of Birth)

» NPI has not been associated with a TPN (Trading Partner Number) or is associated with the wrong TPN/clearinghouse

» Claim submitted prematurely (COBA)

How to prevent your claims from being rejected:

» Check eligibility prior to submission

› Verify DOB

› Ensure the ID number is accurate (i.e. 13 digits; starts with 1741000)

## EDI Claims

» Check claim information

› DOS (Date of Service) – DOS must be accurate **(no post-dating)**

› Rendering NPI

› Verify CPT codes are valid, as well as modifiers

We encourage you to check your claims prior to submission to avoid the pitfalls of rejected claims and to have them accepted in a timely manner!

*Member Watch: Billing*

# When Lab Testing Hurts Your Patients

Many of your PEHP patients are getting stuck with large unexpected medical bills due to provider offices sending laboratory test(s) to out-of-network laboratories and due to requests for non-covered genetic testing.

We often see claims where the billed amounts are over 500% above what PEHP allows for the service. This can leave your patients, our members, with balance bills for thousands of dollars.

Your patients trust you and your staff to check for prior authorization requirements and to send their tests to laboratories that are contracted with their PEHP plan so that they are protected from balance billing and with the assurance that the services ordered will be covered. Members often feel upset and misled by both the providers and PEHP when they are put in these situations.

The two categories of laboratory testing that are hurting your patients the most are genetic testing and toxicology lab work.

**All genetic tests require preauthorization.**

PEHP has clinical policies that must be met for coverage for genetic testing; in addition, many genetic tests are not covered. Failure to obtain preauthorization for a test leaves a member at risk of having no coverage or having the claim paid at out-of-network benefits, leaving them with large financial obligations.

Covered genetic tests should be sent to participating providers. A complete list of participating genetic laboratories can be found on our website at www.pehp.org, under the specialty "Genetic Laboratory." Even genetic tests covered under the Affordable Care Act require pre-authorization and may not be paid if they are directed to a non-contracted genetic laboratory.

We have also seen a large increase of medically unnecessary toxicology testing. As a result, several of the non-contracted toxicology labs have no out-of-network benefits.

We encourage your office to direct medically necessary services to contracted providers so members have a better healthcare experience and are better protected financially.

# Rendering and/or Incident-to Services

**P**EHP's Financial Assurance Department is committed to identifying fraud, waste and abuse and provider education when needed.

During several random audits, the Financial Assurance Department has identified many provider offices that are not correctly following the Centers for Medicare and Medicaid Services (CMS) "incident-to" guidelines and are not billing claims under the correct rendering provider.

PEHP follows CMS's "incident-to" guidelines for physician extenders. A physician can bill an incident-to service when billing for auxiliary personnel.

CMS states auxiliary personnel include nurses, technicians, certified nurse midwives, clinical psychologists, clinical social workers, physician assistants, nurse practitioners, and clinical nurse specialists.

For a complete listing of guidelines, we invite www.cms.hhs.gov/manuals/Downloads/bp102c15.pdf. you to visit CMS's website to learn more at: Refer to Chapter 15, section 60.

### Summary of Guidelines

A summary of the guideline includes the following:

» Services or supplies as an integral, though incidental, part of the physician's personal or professional services in the course of diagnosis or treatment of an illness.

» The physician MUST initiate the care but need not render a service at each instance of billing.

» The physician must remain actively involved in the care of the patient's condition.

# Expediting Turnaround Time

**A**s of April 1, 2015, PEHP has made a change to our appeals process.

We're confident this change will speed up our disputed claims/appeals turnaround time.

If a provider wishes to dispute any determinations made to a claim, the provider must continue to dispute the determination within 180 days after the claim was processed.

All disputed claims will first be reviewed by our Benefits Resolution Department before they can be appealed to our Executive Review Committee.

We will not require a form to be completed for the initial review.

If a provider disagrees with the determination made by the Benefit Resolution Department, the provider will be given instructions on how to appeal the determination to PEHP's Executive Review Committee.

To dispute or appeal a claim, inquires should be sent to:

PEHP Appeals and Policy Management Department
P.O. Box 3836
Salt Lake City, Utah 84110-3836
By fax: 801-320-0541

Our complete claims dispute and appeals process can be found on our website at: https://www.pehp.org/providers/claims-and-billing/appeals

### DID YOU KNOW?

*Contracted providers have the responsibility to file the claim within 12 months from the DOS. 15 months if the claim is for COB.*

# Headaches: Invasive Procedures

**P**EHP now considers trigger point injections and occipital nerve blocks experimental and investigational for the treatment of cervicogenic headache, occipital neuralgia, cluster headache, chronic daily headache, and migraine headache because their effectiveness for these indications has not been established.

To find the full policy, login to the secured provider site and click on "Clinical Policies" on the left hand side.

We encourage you to stay up to date on our policies by regularly checking them out online!

### Policy Excerpt



### DID YOU KNOW?

*You can call your Provider Relations Specialist if you've misplaced your login information, forgotten it or simply locked yourself out.*

# Pointers for Trouble-Free Transition

**O**ctober will be here before you know it! You'll be pleased to know that PEHP is right on track for the ICD-10 implementation. To keep our provider community in the loop, below are things we've recently tested:

» Claims Intake

» Adjudication

» Financial Outcomes

» Report Capabilities

To better assist your office with this transition trouble-free, we would like to offer a few key pointers:

» Dual use of ICD-9 and ICD-10 will not be accepted for the same claim.

» If the dates of service span the implementation date of Oct. 1, 2015, the claim will need to be split.

» For DOS on inpatient claims that will span 10/01/15, PEHP will take the admit 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 10/01/15, the DX code should be coded in ICD-10.

» PEHP will only accept codes that are reported to the highest character and specificity available and consistent with ICD-10 coding guidelines and recommendations from CMS.

### Testing Inquiries

**Interested in testing with us?**
Contact our EDI Department (801-366-7544) or PEHP's Project Manager, Lance Toms (lance.toms@pehp.org)

**Currently testing, but have questions?**
Contact PEHP's Project Manager, Lance Toms or PEHP's EDI Manager, Terri Airmet (terri.airmet@pehp.org)

› Examples:

» Laterality (Right, Left, Bilateral, Unilateral)

» Anatomical locations

» Trimester

» Type of diabetes

» Known complications or comorbidities

» Description of severity, acute or chronic or other known parameters, etc.

If you have any other questions regarding ICD-10, please visit the CMS or AMA websites.

**DID YOU KNOW?**

*PEHP for PROVIDERS is a secured online provider site which allows you to easily and cost effectively access resources and information that can simplify and expedite your organization's daily tasks.*

# Web Tool Enhancements

**W**e are happy to inform you that enhancements have been done on our web-based code auditing reference tool. Providers can now enter more claim information on this tool, including the claim DX, number of units billed and the patient's age. Providers are encouraged to use this tool to review PEHP's coding rationale regarding claims payments online.

The tool is available through the secured portion of our website; therefore, a login is required. If you do not have one or need more information on how to navigate our website and this tool, contact your Provider Relations Specialist.

We encourage your office to take advantage of this useful tool, to have a better understanding of the coding rules and edits that are in place.

### Advantages of the Tool

» Reduces administrative costs!
› Fewer "front line calls"
› Less provider appeals
› Reduces reprocessing of claims

» Easy to use!
› Provides an immediate response to provider inquiries related to the evaluation of code combinations during the processing of claims
› Enables providers to pre-screen a claim and/or review the rationale for a claim denial

» Available 24 days, 7 times a week on PEHP's website

» Used by internal personnel for consistent communication with provider

# PEHP Healthy Utah Navigates Online

**S**pring is a season for new beginnings, transformation, and growth. . . . making it a perfect time for change. As of March 2015 PEHP members can access wellness resources previously found at HealthyUtah.org on the PEHP website! PEHP simplified by providing members with one website, one account, and one login to remember.

PEHP consolidated all insured member health benefits in one convenient place at www.pehp.org.

Why the change? Merging online resources from the Healthy Utah website makes it easier for your patients to take full advantage of their health and wellness benefits.

Help your patients by encouraging them to access benefits such as health coaching and weight management tools from PEHP Waist Aweigh. Support PEHP WeeCare – a prenatal and Postpartum program for expectant mothers.  PEHP Healthy Utah is an exclusive wellness benefit for eligible PEHP members and their spouses.

Through PEHP Healthy Utah members and their eligible spouse are offered a variety of programs, services, and resources to help them get and stay well – including rebates for good health and improvements.

We appreciate our providers and hope that your office will promote these useful services to help improve patients quality of life.

**DID YOU KNOW?**

*For benefits, status of an appeal or preauthorizations and/or complicated claim questions, call Customer Service at 801-366-7555.*

*Group Benefit Changes*

# State Moves to One OOPM

**E**very year our groups make benefit changes to their plans. This year, the State of Utah will be making some significant changes to their Traditional Plan deductibles and maximum out-of-pocket benefits.

To become compliant with future Affordable Care Act (ACA) out-of-pocket maximum requirements, the State of Utah (and other groups) are rolling up separate out-of-pocket maximum categories such as pharmacy into one out-of-pocket maximum.

As a result, the annual deductible has increased from $250/$500 to $350/$700 and the medical out-of-pocket maximum has changed from $2,500/$5,000/$7,500 with other out-of-pocket categories to $3,000/$6,000/$9,000 with one combined out-of-pocket maximum.

We invite you to verify coverage online or to call if you have specific benefit questions.

*PEHP Dual Coverage*

# Allow Time for the Dual Process

**P**roviders do not need to submit the secondary coverage to PEHP when the prime is PEHP as well. We will process under the dual coverage automatically.

The dual coverage may not always be paid on the same day, but always within a couple days from each other.

To avoid unnecessary claim submissions on your end and numerous duplicate denials on our end, please allow time for the dual to process.

If you haven't received a response on the dual coverage, prior to submitting the claim, check online or call Customer Service.

*PEHP Pharmacy*

# PEHP's Preauthorization Updates

**P**EHP 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 at www.pehp.org. Choose *Providers/Provider Login* and enter your superuser ID and password.

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.

### Drugs REMOVED from List

| Drug Name | Effective Date |
|---|---|
| Zenatane | March 1, 2015 |
| Claravis | March 1, 2015 |
| Myorisan | March 1, 2015 |
| Sotret | March 1, 2015 |
| Adderall XR | March 1, 2015 |
| Daytrana | March 1, 2015 |
| Stratter | March 1, 2015 |
| Vyvanse | March 1, 2015 |

### Drugs ADDED to List

| Drug Name | Effective Date |
|---|---|
| Erwinaze | March 1, 2015 |
| Viekira Pak | March 1, 2015 |

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.

## The 2015 Community Education Fairs – Bigger and Better than Ever

Come join us for a day of learning, with topics for just about every interest:

⇒ Continuing favorites like Privacy & Security and Payer Panel will be back, along with timely new topics.

⇒ Get ready for ICD-10 with a variety of classes for different readiness levels and needs, including:

   o A ground-floor ICD-10 overview
   o An "ask the experts" session
   o An overview of ICD-10 changes to injury coding

**Come** for the exciting educational sessions; **stay** for great networking opportunities, face time with vendors, and fantastic prizes! Clinicians and clinical staff, administrators, office managers, billers, and coders will all find valuable information in these sessions.

**Don't miss this chance to catch so much expertise under one roof!**

### Fair Dates and Locations:

**Provo** – Wednesday, April 15
Utah Valley Convention Center
220 W Center St.

**Layton** – Tuesday, April 21
Davis Conference Center
1651 N 700 W

**Salt Lake City** – Tuesday, April 28
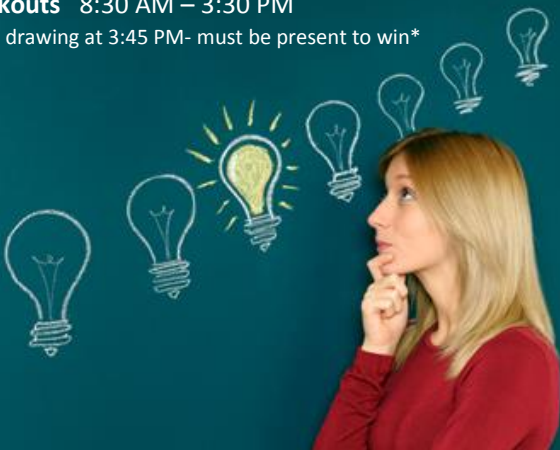South Towne Exposition Center
9575 S State St.

**St. George** – Thursday, April 30
1424 E Foremaster Dr.

### Time (All Locations)

**Registration**  8:00 AM – 8:30 AM

**Breakouts**  8:30 AM – 3:30 PM
*Prize drawing at 3:45 PM- must be present to win*

### Register and view the schedule at www.uhin.org/events

This education series is a joint effort of many organizations from your Utah healthcare community.

## 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** | **In-State Cities** |
|---|---|
| Box Elder, Cache, Davis, Morgan, Rich, Summit, Weber | Murray (84107, 84123 & 84157) |

**Out-of-State**
Arizona, Idaho

### SERVICE AREA #3

**Angel Macas**
Provider Relations Specialist

*Phone:* 801-366-7721 or 800-753-7721
*Fax:* 801-245-7721
*E-mail:* angel.macas@pehp.org

| **In-State Counties** | **In-State Cities** |
|---|---|
| Carbon, Daggett, Duchesne, Emery, Juab, Millard, Sanpete, Tooele, Uintah, Utah, Wasatch | 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

**Glenda Lowe**
Client Liaison

*Phone:* 801-366-7496 or 435-673-6300
 or 800-950-4877
*Fax:* 435-634-0654
*E-mail:* glenda.lowe@pehp.org

| **In-State Counties** | **Out-of-State Cities** |
|---|---|
| Beaver, Garfield, Grand, Iron, Kane, Piute, San Juan, Sevier, Washington, Wayne | Las Vegas, Nevada Mesquite, Nevada |

### MAILING ADDRESSES

**Service Area #4**
**Glenda Lowe**

URS/PEHP
166 North 100 East #9
St. George, UT 84770

**All Other Service Areas & Representatives**

PEHP
560 East 200 South
Salt Lake City, UT 84102

### 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