

connection

important information for fallon community health plan physicians and providers

may 2008

● every day affairs

member tools for healthier living

Fallon Community Health Plan members now have additional help to quit smoking, improve nutrition and manage weight, stress and lower back pain.

FCHP offers its members **Nurse Connect**—free, around-the-clock access to registered nurses or other health care professionals by calling 1-800-609-6175. For additional resources, members can log on to Nurse Connect's Dialog CenterSM through the "My FCHP" section of our Web site, www.fchp.org.

New on the Dialog Center are five self-learning programs that provide health assessments and tailored plans for achieving goals for weight management, nutrition improvement, stress management, smoking cessation and low-back pain. The programs offer thoughtful guidance, motivational tips and the tools to make lasting health behavior changes. Remind your FCHP patients about it!

oh, baby! program adds safety kits

We know that the safety of your patients is a top priority—it's one of ours, too! That's why we're introducing a Home Safety Kit to our popular Oh Baby! program for new and expectant parents.

Members enrolled in Oh Baby! already receive great benefits, such as a free convertible car seat, free prenatal vitamins and a book by the American Academy of Pediatrics. Now, they will also receive this 46-piece kit that includes:

- Safety catches for cabinets
- Outlet plug covers
- Cabinet sliding locks
- Multi-purpose latches
- Door knob covers

Your FCHP patients can learn more by visiting www.fchp.org or may call our Customer Service Department to enroll at 1-800-868-5200 (TDD/TTY: 1-877-608-7677), Monday through Friday, 8 a.m. to 6 p.m. ●

\$0 copayments for routine physical exams

We'd like to remind you about an FCHP benefit that is very popular with our members. FCHP Direct Care, FCHP Select Care and Fallon Preferred Care members* have **no copayments** for office visits with their primary care physician or gynecologist for routine physical exams. Also, well-child visits for dependent children (to age 19) are covered in full.

Routine physical exams are given by a member's primary care physician, defined as an internal medicine or family practice physician, a pediatrician, nurse practitioner or physician assistant associated with the member's PCP, as well as a member's gynecologist. Routine physical exams are in accordance with Massachusetts Health Quality Partners recommended guidelines for wellness visits.

We've informed our members that routine "wellness" exams focus more on determining their risk of disease and recommending preventive measures—and should not be a substitute for a regular "sick" visit as needed.

We're proud to be the first and one of the only health plans in Massachusetts to offer this benefit, making preventive care easier and more affordable for your patients.

* Benefits may vary by employer. ●



masshealth: coverage for special formulas shifting

The Massachusetts WIC Nutrition Program is adopting a 2001 federal regulation that identifies Medicaid as the primary payor of special/prescription formulas for individuals participating in both the WIC and MassHealth programs. Therefore, WIC participants who are also Fallon Community Health Plan MassHealth members **now will be receiving special/prescription formulas through their FCHP MassHealth insurance.**

Except for the first month, Massachusetts WIC is no longer providing special/prescription formulas for these MassHealth members. However, Massachusetts WIC will continue to provide special/prescription formulas to WIC-enrolled participants who are not eligible for MassHealth.

MassHealth/WIC participants will continue to receive all other WIC services, including nutrition counseling and education, immunization screenings, health and social service referrals and farmer's market coupons in the summer, as well as a WIC food package that is appropriate for their nutrition and medical needs.

If you have questions regarding the process for prescribing special/prescription formulas for your FCHP MassHealth members, please call the provider service line at 1-866-ASK-FCHP, press 4. ●



let's connect!

new program to support depression treatment

Fallon Community Health Plan Care Services and Beacon Health Strategies are pleased to announce the launch of a **Depression Health Management program** this June. This new program will be available to most of FCHP's commercial plan members.

The Beacon Depression Health Management program is intended to improve the quality of care received by FCHP members with depression and selected chronic medical illness, as measured by improved health-related outcomes.

What does this mean? For our members, we would expect to see improvement in how effective and efficient their care is. This will encompass our members getting the appropriate care and treatment in a timely manner so that they can function well and enjoy a better quality of life. We also anticipate a decrease in unnecessary utilization of services.

Along with these positive "member-focused" outcomes, we believe this program will assist FCHP-contracted primary care physicians and other providers

in treating our members with depression. A key component of the Depression Health Management program will be an integration of behavioral health and primary care.

We look forward to bringing you additional information about this program in the coming months. ●

identifying ultrabenefits members and their claims

Fallon Community Health Plan's wholly owned subsidiary, UltraBenefits, Inc., manages health benefits for approximately 20,000 members nationally. UltraBenefits has an integrated claims and administration system that supports unlimited plan designs and managed care networks, including both national and regional preferred provider organizations.

UltraBenefits serves as a third party administrator with benefit plans that include medical, dental and disability claim processing, as well as claims management services, premium and fee-billing services, and administration of flexible spending accounts, health reimbursement accounts and COBRA.

If you see any patients that are UltraBenefits members, please note that **UltraBenefits' mailing address for claims submission is:** UltraBenefits, Inc., P.O. Box 763, Westborough, MA 01581; fax: 1-508-438-2519. UltraBenefits' claims *should not* be sent to Fallon Community Health Plan's offices.

This **sample identification card** identifies the distinctive features on the front and back sides of the UltraBenefits ID card:

Administered by: UltraBenefits, Inc. P.O. Box 763 Westborough, MA 01581	10167 ABC COMPANY
For Customer Service & Eligibility Inquiries: 1-866-858-7223	
RX Group#: 9999999999	
Member I.D.#: 9999999999	
Name: JOHN SMITH	
Plan #: 999	
Office Copay: \$20	
	Rx BIN#: 610474 Rx PCN#: TDI 1-888-645-9303 www.caremark.com
fallon health & life assurance company, inc.	

10167	
Important Information Regarding All Hospital Admissions	
Medical benefits are contingent upon obtaining certification prior to elective in-patient hospital admissions, all surgical procedures, certain diagnostic tests including MRI's, CT scans and PET scans, transplant evaluations, and within 48 hours of any emergency hospital admission. Notification for all admissions, evaluations and procedures is made by calling Fallon Community Health Plan at 1-800-811-5134.	
Out of Area Network: For Participating PHCS Providers: 1-800-678-7427	
Claims and Benefit Plan Information	
Send all claims to: UltraBenefits Inc. P.O. Box 763 Westborough, MA 01581	
For Claims and Benefit Plan Information call UltraBenefits, Inc.: 1-866-858-7223 For information on In-Network Providers, Call FCHP at 1-800-811-5134	

For more information about UltraBenefits, please visit the company's Web site at www.ultrabenefits.com or call 1-866-858-7223. ●

matching the right words with the right process

One of these things is not like the other,
One of these things doesn't belong,
Can you tell which thing is not like the other,
Before I finish my song?

Do you remember Cookie Monster, singing this song on Sesame Street®? The ability to sort things out, to distinguish the difference between objects and terms, is a skill we use every day in every profession. See if you can identify in which group below the words are “not like the other.”

- a) immunizations—vaccines
- b) RAS—EOB
- c) referral—preauthorization
- d) deadline—filing limit

The correct answer is c. There's a distinct difference between a referral and a preauthorization. A *referral* is a recommendation by which a primary care provider sends a member to another contracted provider for services that are typically outside the PCP's scope of practice. In January 2007, FCHP introduced a paperless referral process—our commercial HMO members and our Fallon Senior Plan™ members still require referrals for specialty care.

Too often, providers use the term “referral” interchangeably with the term “preauthorization” when, in fact, it's “not like the other.” Both the definition and the process for preauthorization are distinctly different from a referral. Preauthorization is defined as the prospective or concurrent review process used by FCHP to determine coverage for a particular medical service. It involves the review of eligibility, level of benefits and medical necessity.

For a more complete explanation of the difference between a referral and a preauthorization and how to implement both, please visit the provider section of our Web site. You'll find information in the *Provider Manual*, under the “Managing Patient Care” chapter, the “PCP Referral and Plan Preauthorization Process” topic. ●

infertility preauthorization form online

Fallon Community Health Plan's Infertility Services Preauthorization Request Form (medical and pharmacy) is now available on our Web site with other frequently used forms. For easy access, please go to www.fchp.org/Extranet/Providers/Forms.htm. ●

address/telephone/fax changes

If you need to notify us of a change to your fax or phone number, or to your practice or billing address, you can do so in one easy step. Please fax this information to the Provider Service Department at 1-508-368-9902. Should you have any questions, please call Provider Services at 1-866-275-3247, option 4. We're ready to help and appreciate you keeping this information current with us. ●

get free patient safety alerts

Please see *Connection* online to learn about a new electronic service that gives you FDA patient-safety alerts instantly—and free. ●

billing bytes

ophthalmology update

HCPC code J9035 is for Avastin® at the chemo dose of 10 mg, not for the ophthalmology compound dose of 1.25 mg. **Please correct your coding to J3490 (not J9035) to bill for Avastin intraocular injections.** FCHP will reimburse the invoice cost for the compounded dose. Your claim needs to document the Avastin dosage injected in order to receive correct reimbursement. ●

script alert

formulary updates

Fallon Community Health Plan continually updates its formularies, including changing prior authorization requirements and adding new medications. Please see *Connection* online for changes to our commercial plan formulary. ●

drug updates

Zyrtec® is now available as an over-the-counter medication. The cost of the Zyrtec OTC is much lower than the third-tier copayment that members pay. Pfizer also is stopping the production of all prescription Zyrtec. If any of your patients are taking Zyrtec as a prescription, now is the time to switch them to the OTC product.

medication safety issues

- **Desmopressin acetate (DDAVP® nasal spray)** is no longer approved for primary nocturnal enuresis due to increase in risk for severe hyponatremia and seizures.
- **Deferasirox (Exjade®)** has shown an increase in risk of liver failure progressing to death. Renal failure progressing to death has already been noted for Exjade. There are now strong warnings about its use.
- **Fentanyl patches (Duragesic® Patch)** was the subject of an FDA advisory in December, alerting all practitioners that the agency continues to receive reports of death and life-threatening adverse events. They advise that fentanyl patches should only be used if a patient cannot take any other pain medicines.
- **Botulinum toxin (Botox®)** has had an increase in adverse reactions including death and respiratory failure following treatment for a variety of disease states. Many of the issues occurred in children being treated with Botox. Adverse reactions mimic symptoms of botulism. ●

coding diabetes with diabetic manifestations

Diabetes mellitus (DM) is assigned to ICD-9-CM category 250. Fourth and fifth digits are needed to complete the code:

- The fourth digit identifies any condition or manifestation associated with diabetes
- The fifth digit refers to type-1 or type-2 diabetes and whether the diabetes is controlled or uncontrolled.

There must be a cause-and-effect relationship between the diabetes and a condition before it can be coded as a diabetic condition. The fact that the patient has diabetes and another condition does not necessitate coding it as a diabetic condition.

For example, if a diabetic patient has a foot ulcer, the foot ulcer cannot be coded as a diabetic complication unless the physician documents that it is due to diabetes or that it is a diabetic foot ulcer.

A patient may have diabetic complications in more than one system. Assign as many codes from ICD-9-CM category 250 as needed to fully describe the patient’s condition(s). The manifestation(s) and the etiology should both be coded.

For example, if a patient has diabetic nephropathy, diabetic retinopathy, diabetic neuropathy and diabetic peripheral vascular disease, and each diagnosis was addressed and documented during the visit, all of the following codes should be assigned:

250.4x	DM with renal manifestations
583.81	Nephropathy in disease classified elsewhere
250.5x	DM with ophthalmic manifestations
362.0x	Diabetic retinopathy proliferative vs. nonproliferative
250.6x	DM with neurological manifestations
357.2	Polyneuropathy in diabetes
250.7x	DM with peripheral circulatory disorders
443.81	Peripheral angiopathy in disease classified elsewhere

If the type of diabetes is not specified, and there is no indication that the patient has a diabetic complication or that the diabetes is out of control, then the correct ICD-9-CM code is 250.00.

Coding for diabetes and associated manifestations are solely dependent on the provider’s documentation in the medical record.

If you have any questions regarding the Risk Adjustment Payment methodology, contact your provider representative. Representatives from FCHP’s Medicare Reimbursement and Analytics Department are available to conduct presentations as appropriate. ●

code changes

Please note the following CPT code changes.

The following codes are covered for all plan types. These services *require plan preauthorization*.

CPT	Description	Effective date
D5984	Radiation shield	Immediately
D5985	Radiation cone locator	Immediately

The following codes are *not covered* for all plan types.

CPT	Description	Effective date
E0240	Bath/shower chair, with or without wheels, any size	July 1, 2008
E0241	Bathtub wall rail, each	July 1, 2008
E0242	Bathtub rail, floor base	July 1, 2008
E0243	Toilet rail, each	July 1, 2008
E0244	Raised toilet seat	July 1, 2008
E0245	Tub stool or bench	July 1, 2008

The following codes *will no longer be separately reimbursed*.

CPT	Description	Effective date
94014	Patient-initiated spirometric recording per 30-day period of time; including reinforced education, transmission of spirometric tracing, data capture, analysis of transmitted data, periodic recalibration and physician review and interpretation	July 1, 2008
94015	Patient-initiated spirometric recording per 30-day period of time; recording	July 1, 2008
94016	Patient-initiated spirometric recording per 30-day period of time; physician review and interpretation only	July 1, 2008

The following codes *no longer require plan preauthorization*.

CPT	Description	Effective date
89300	Semen analysis; presence and/or motility of sperm including Huhner test (postcoital)	Immediately
89310	Semen analysis; motility and count (not including Huhner test)	Immediately
89325	Sperm antibodies	Immediately ●

have you seen your
connection?

Please pass this along to
the next person on the list.

Date received _____

Please route to:

- Office manager
- Physician
- Billing department
- Receptionist
- Referral site
- Other

get connected

connection online • may 2008

Your online supplement to *Connection* at www.fchp.org/Extranet/Providers/Connection.htm contains:

- get free patient safety alerts
- commercial plan formulary updates

medical payment policies:

The following policy is new:

- *Dermatology payment policy*

The following policies have been reviewed and **have substantial changes.**

For more details, please go to *Connection* online.

- *Anesthesia payment policy*
- *Observation status payment policy*

Connection is a bimonthly publication for all FCHP ancillary and affiliated providers. The next copy deadline is May 7, 2008.

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Questions?
Call 1-866-ASK-FCHP
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www.fchp.org