

Connection

Important information for Fallon Community Health Plan physicians and providers

January 2009

● Every day affairs

FCHP's MCC and other plan design changes for January 1

As of January 1, 2009, in order to meet "minimum creditable coverage" requirements under health care reform, we are replacing most of our existing non-prescription drug plans with new plan design options that have a **prescription drug coverage benefit of \$25/\$100/\$100**. These plans mirror the non-prescription drug plans in every other way, and FCHP members in non-compliant plans *will be switched automatically* to one of these corresponding new plans.

Also in 2009, the out-of-pocket maximums for several of our Fallon Preferred Care high-deductible plans will increase *upon anniversary date renewals*. If you have any questions about these changes, please contact Provider Relations at 1-866-ASK-FCHP, press 4. For more details, see *Connection* online. ⓘ

FCHP boosts fitness reimbursement

We are pleased to announce that we have increased our It Fits! annual reimbursement amount to **\$400** (up from \$300) for families and to **\$200** (up from \$150) for individuals—**effective January 1, 2009**. Fallon Community Health Plan has one of the highest fitness reimbursements of any health plan in Massachusetts.

Also, we'll now reimburse for **race entry fees and hiking club fees** in 2009—great additions to our long list of eligible fitness activities, including our recently added It Fits! reimbursement for ski lift tickets and season passes.

FCHP is continuing its strong and unique commitment to promoting healthy lifestyles among our members by helping them to afford their favorite fitness activities in this tough economy. Details are available on our Web site, **fchp.org**.

* Reimbursement amount may vary by plan design and employer. ●

Retail specialty drugs to be dispensed at CVS Caremark Specialty

Effective March 1, 2009, Fallon Community Health Plan will exclusively partner with CVS Caremark Specialty Pharmacy for all specialty drugs dispensed through the retail benefit. This means that members using specialty drugs through the pharmacy benefit will be required to use one of the following pharmacies:

- **CVS Caremark Specialty Pharmacy** - Mail order 1-877-287-1234
- **CarePlus CVS/pharmacy** (formally PharmaCare pharmacies located in Fallon Clinics as well as PharmaCare Specialty Pharmacies located in Boston and Providence, RI)

No changes will be made to specialty drugs that are billed through the medical benefit. **The change is only for retail benefits.** Separate communication will be made to affected members and their prescribing physicians notifying them of this change.

For more details about the process and the medical conditions/treatments that may be affected by this change, please see *Connection* online. ⓘ

● Let's connect!

Provider forms now available in editable format!

You asked ... we listened! FCHP now offers a variety of provider forms in editable PDF format. With this new feature, you can type information into the online form and print it for a clear submission, making the process faster and easier than ever.

The following forms are available in this new format:

- Provider Claim Adjustment Form
- Provider Appeal Request Form
- Provider Tools and Electronic Data Submission Enrollment Form
- Prescription Prior Authorization Form
- Request for Preauthorization Form
- PharmaCare Mail Order Prescription Form

To download and save your copies of these forms, visit fchp.org/Providers/Forms.htm. ●

Reminder to notify us of termination

Fallon Community Health Plan requires all primary care physicians, specialists, specialty and primary care groups to provide us with 60 days written notice prior to their non-renewal or termination with us. This requirement includes all physicians/providers contracted through a group or provider organization.

This process gives FCHP time to notify our affected members in writing within 30 days of the physician's notice and allow them sufficient time to choose a new provider.

Notice of non-renewals and/or terminations should be sent to the following address:

Fallon Community Health Plan
Attn: Provider Relations Department
10 Chestnut St.
Worcester, MA 01608 ●

Closing/reopening panels or practices to FCHP members

Primary care physicians or OB/GYN providers agree to give Fallon Community Health Plan written notice of their intent to no longer accept new or additional plan members as patients. They only may decline FCHP members as new or additional patients if they decline *all* new or additional patients regardless of their insurer.

PCPs or OB/GYN providers can reopen their panel or practice upon advance written notice to FCHP. Our members who have signed an enrollment application

prior to, or within 30 days of, the panel or practice closing will be allowed to choose that provider. The providers cannot close their panel or practice to existing patients transferring to FCHP insurance.

For additional information regarding this topic, please refer to the **Provider Relations section** of the *FCHP Provider Manual*. ●

Fallon Senior Plan: 2009 Group Medicare product update

We're pleased to announce that premiums and benefits for our 2009 Group Medicare options with Fallon Senior Plan™ have **no major changes**. We feel it's important to continue to offer affordable options with comprehensive benefits.

We have made a **sizeable increase in the Group Medicare HMO service area** for our employer and union group customers—expanding into Hampden County, effective January 1, 2009, and giving access to members who live in some of the 2008 HMO service area's border towns.

Our Group Medicare members also have a **new U.S. travel benefit** and many great "healthy extras" such as the **eyewear purchase benefit** and a **hearing aid purchase benefit** and more.

For all the details about Group Medicare product for 2009, please see this issue of *Connection* online. You may also contact Provider Services at 1-866-ASK-FCHP, press 4. ⓘ


New doc finder at fchp.org

At the end of October, Fallon Community Health Plan introduced a new and improved "Find a doctor" tool on its Web site that provides FCHP members and prospects with a more effective and efficient process to search for providers. For details about the improvements, please see *Connection* online. ⓘ

FCHP adds MinuteClinic to provider network

Fallon Community Health Plan's commercial plan members are now covered for treatment received at new MinuteClinic® locations opening in the state. MinuteClinic, Inc., has been a subsidiary of CVS Caremark Corporation since 2006.

These "mini-clinics"—also known as limited service providers—are a new phenomenon for Massachusetts. The first on the scene in mid September, CVS' for-profit MinuteClinic already has several CVS/pharmacy

locations in eastern Mass.—and will eventually total about 100 clinics across the state. For details about the CVS MinuteClinic, please see the article in *Connection* online. 

Summit ElderCare opens second location in Worcester

Summit ElderCare®, a Program of All-Inclusive Care for the Elderly sponsored by Fallon Community Health Plan, has opened a second Worcester site at 1369 Grafton St. The newly-constructed, 11,700-square-foot facility in Worcester will accommodate 100 program participants daily.

The program, which is a comprehensive package of insurance, medical and social services, provides families and caregivers with an attractive alternative to nursing home placement. Summit ElderCare also has locations in Charlton and Leominster. For more information about the program and who is eligible, go to summiteldercare.org or call 1-800-698-7566. ●

Our position on incentives

Fallon Community Health Plan affirms the following:

- Utilization management decision-making is based only on appropriateness of care and service and existence of coverage.
- FCHP does not specifically reward practitioners or other individuals for issuing denials of coverage or care.
- Financial incentives for UM decision makers do not encourage decisions that result in underutilization. ●

MR documentation standards and record keeping practices


FCHP requires medical records to be maintained in a manner that is current, detailed, and organized and that permits effective and confidential patient care and quality reviews. FCHP medical record keeping standards offer guidance in maintaining an organized medical records keeping system.

The FCHP medical record documentation standards and record keeping practices are located at fchp.org/Extranet/Providers or, for a paper copy please call Quality & Health Services at 1-508-368-9103. ●

Quit-smoking collaboration with FCHP

With the new year, some of your patients may be thinking about changing their smoking habits. Together, we can help them succeed.

Fallon Community Health Plan offers a highly successful, personalized tobacco cessation program to all members. **Quit to Win provides free support groups**, facilitated by qualified experts, in locations throughout Central Massachusetts. We offer **free, individual telephone support as well**. Any Fallon Clinic provider can refer patients into the program. As an additional member-only benefit, nicotine replacement patches and/or gum are available to FCHP members at a significantly reduced cost (or **free** for some plans!)

Contact FCHP's Quit to Win program: 1-888-807-2908 or QuitToWin@fchp.org. For more details about the program and other ways FCHP can support you and your patients, see our article in *Connection* online. 

Quality focus

HEDIS® 2009 reminder


As the Healthcare Effectiveness Data and Information Set (HEDIS) season rapidly approaches, FCHP would like to remind you how important the information is that you and your staff provide to our Quality and Health Services department.

We'll send out Provider Abstraction forms with specific medical record documentation requests beginning in January and continuing through April for several different measures. If you have any questions or would like help to prepare for the upcoming HEDIS season, please contact Robin Byrne, FCHP Quality and Health Services, at 1-508-368-9103.

HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA). ●

Important links to information about care

In this issue of *Connection* online, we provide you with important information about how we work with you and our members to ensure the quality and safety of clinical care. We cover **clinical criteria for utilization care services, our quality program and our members' rights**. We hope you'll take the time to review this article in *Connection* online and follow the links to our Web site, fchp.org, to learn more.

If you would like to receive a copy of this information, please call our Provider Relations Department at 1-866-ASK-FCHP (1-866-275-3247), press 4. 

Coding corner

Code updates

Please note that, **effective immediately**, the following codes *no longer require plan preauthorization*.

K0601	Replacement battery for external infusion pump owned by patient, silver oxide, 1.5 volt, each
K0602	Replacement battery for external infusion pump owned by patient, silver oxide, 3 volt, each
K0603	Replacement battery for external infusion pump owned by patient, alkaline, 1.5 volt, each
K0604	Replacement battery for external infusion pump owned by patient, lithium, 3.6 volt, each
K0605	Replacement battery for external infusion pump owned by patient, lithium, 4.5 volt, each

Please note that, **effective March 1, 2009**, the following codes are *not covered for all plan types*.

E0274	Over bed table
E0218	Water circulating cold pad with pump

Please note that, **effective March 1, 2009**, the following codes *will no longer be separately reimbursed*.

S0270	Physician management of patient home care, standard monthly case rate (per 30 days)
S0271	Physician management of patient home care, hospice monthly case rate (per 30 days)
S0272	Physician management of patient home care, episodic care monthly case rate (per 30 days)
S0273	Physician visit at member's home, outside of a capitation arrangement
S0274	Nurse practitioner visit at member's home, outside of a capitation arrangement
S2325	Hip core decompression

Please note that, **effective immediately**, the following code *is covered for all plan types*.

A4332	Lubricant, individual sterile packet, each
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Please note that, **effective immediately**, the following codes are *covered for all plan types and plan preauthorization is not required*.

A5510	For diabetics only, direct formed, compression molded to patient's foot without external heat source, multiple-density insert(s) prefabricated, per shoe
G0392	Transluminal balloon angioplasty, percutaneous; for maintenance of hemodialysis access, arteriovenous fistula or graft; arterial
G0393	Transluminal balloon angioplasty, percutaneous; for maintenance of hemodialysis access, arteriovenous fistula or graft; venous

Please note that, **effective immediately**, the following code *is covered as a DME item and requires plan preauthorization*.

V2600	Hand held low vision aids and other non-spectacle mounted aids.
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Please note that, **effective March 1, 2009**, the following codes are *covered for Fallon Senior Plan™ members only and require plan preauthorization*.

0171T	Insertion of posterior spinous process distraction device (including necessary removal of bone or ligament for insertion and imaging guidance), lumbar; single level
0172T	Insertion of posterior spinous process distraction device (including necessary removal of bone or ligament for insertion of imaging guidance), lumbar; each additional level (list separately in addition to primary procedure)
C1821	Interspinous process distraction device (implantable) ●

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New 2009 CPT/HCPCS codes

All new codes will require preauthorization until a final review is performed by Fallon Community Health Plan. FCHP will review and assign the appropriate coverage and determine preauthorization requirements for all new codes by January 1. FCHP will notify all contracted providers of this determination via the March 2009 issue of *Connection* and in the *Provider Manual* on the FCHP Web site. ●

Script alert

Formulary updates

Fallon Community Health Plan often makes changes to its formularies, including changing prior authorization requirements and adding new medications. For the latest changes to our commercial plan formulary, please see *Connection* online. ⓘ

Billing bytes

Expediting claim adjustments

In order to expedite the processing of corrected claims, please submit all claim adjustment requests to the FCHP Claims Adjustment Team using the **Provider Claims Adjustment Request Form** found in the Forms section of the *Provider Manual*.

Corrected claims can't be filed electronically. They must be dropped to paper and clearly marked "corrected claim." Also, please remember that the corrected claim *must include all claim lines*, not just the claim line needing correction—otherwise the claim will deny as a duplicate.

Please mail or fax your claim with the claim adjustment request form to:

Fallon Community Health Plan
Attn: Claims Dept./Claims Adjustment Team
P.O. Box 15121
Worcester, MA 01615-0121
Fax: 1-508-368-9890

Claim adjustments must be submitted within 120 days from the date of the initial claim denial or Remittance Advice Summary in order to be considered for review. Thank you for your attention to this process. ●

Modifier -26 for clinical laboratory and pathology services

Modifier -26 is used to describe and represent the professional component portion of a procedure or service. There are codes that aptly identify the professional component of clinical laboratory procedures, so for this reason *it is incorrect to report modifier -26 along with these codes*. Some examples of this are: 81003, 81050, 82310, 82374, 82565, 82947, 84520 and 85027. Use of the -26 modifier with these codes will result in a claim line rejection from Fallon Community Health Plan.

For a complete list of clinical laboratory and pathology services for which modifier -26 is appropriate, see a more detailed version of this article in the *Connection* online. ⓘ

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 • January 2009

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

- FCHP's MCC and other plan design changes for 2009
- Retail specialty drugs to be dispensed at CVS Caremark Specialty
- New doc finder at fchp.org
- Fallon Senior Plan: 2009 Group Medicare product update
- FCHP adds MinuteClinic to network
- Quit-smoking collaboration with FCHP
- Important links to information about care
- Modifier -26 and clinical laboratory and pathology services
- Formulary updates – commercial plan

Medical Payment Policies

The following policy is new:

- *Facility Bill/Charge Audit Policy*

The following policies have been reviewed and changes are indicated on each policy:

- *Anesthesia Payment Policy*
- *Emergency Department Payment Policy*
- *Evaluation and Management Payment Policy*
- *Global Surgical Payment Policy*
- *Inpatient Medical Review and Payment Policy*
- *Medical Supplies and Surgical Dressings Payment Policy*
- *Non-covered Services Payment Policy*
- *Procedure Code Review Payment Policy*

The following policy has been retired:

- *Home-grown Codes Policy*

Connection is a bimonthly publication for all FCHP ancillary and affiliated providers. The next copy deadline is **January 7, 2009**.

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questions?

1-866-ASK-FCHP
1-866-275-3247