BlueLink

Medical News & Updates

October 2018 I Volume 20 I Issue 5

CareFirst
Family of health care plans

What's Happening?

- BlueLink Tip — The Provider Engagement Expo Returns
- CareFirst's Member Outreach Campaign Addresses Potential Gaps in Care
- CareFirst Requires Prior Authorization for Genetic Tests Effective Jan. 1, 2019

Health Care Policy

- Effective Dates, CPT® Codes and Policy Updates for October
- New Medical Technology Updates for October

Claims and Billing

- Upcoming Enhancements to the Electronic Prior Authorization Submission for Drugs

Provider Reminders

- Are You Up to Date on Best Practices and Quality Standards?
- Professional Providers – Remember to Use the Proper Evaluation and Management Codes

In Case You Missed It

- Colleague, Are You Located in Rockville, MD or Fairfax, VA? We Have A Training For You
- Changes to Professional Fee Schedule Effective Dec.1
- You Are Invited to Our Upcoming Provider Engagement Expo — Don't Wait to Register

Serving Maryland, the District of Columbia and portions of Virginia, CareFirst BlueCross BlueShield is the shared business name of CareFirst of Maryland, Inc. and Group Hospitalization and Medical Services, Inc. In the District of Columbia and Maryland, CareFirst MedPlus is the business name of First Care, Inc. In Virginia, CareFirst MedPlus is the business name of First Care, Inc. of Maryland (Used in VA by: First Care, Inc.). First Care, Inc., CareFirst of Maryland, Inc., Group Hospitalization and Medical Services, Inc., CareFirst BlueChoice, Inc. and The Dental Network are independent licensees of the Blue Cross and Blue Shield Association. The Blue Cross and Blue Shield Names and Symbols are registered trademarks of the Blue Cross and Blue Shield Association.

CareFirst of Maryland, Inc. and The Dental Network underwrite products in Maryland only.

What's Happening?

BlueLink Tip — The Provider Engagement Expo Returns

Like a good movie sequel that you have waited years for, CareFirst's Provider Engagement Expo returns this fall. The expos will be held at the Sheraton Baltimore North Hotel on Wednesday, October 24 and the College Park Marriott Hotel on Thursday, October 25 from 9 a.m. to 4 p.m.

However, at this sequel you are encouraged to keep your cellphones on and move around the venue to interact with industry peers and representatives. Light refreshments will be served throughout the day.

You'll have the opportunity to attend short breakout sessions on topics of interests such as:

- CareFirst — BlueCard, Appeals and CareFirst.com
- Federal Employee Program — New product, information on the website
- Council for Affordable Quality Healthcare — Keeping Your Data Current
- CVS Caremark — See the New Prior Authorization Tool and How to Use It
- CVS Health — Information on Specialty Pharmacy
- Electronic Data Interchange — New COB Submission Capabilities Coming
- HEDIS and ACA Risk Adjustment/RADV
- And More!

In addition, to the short breakout sessions, we will be joined by the Practice Consulting Group who will provide two sessions:

- CareFirst's Patient-Centered Medical Home Program — Why Primary Care Providers are Concerned about Cost
- Ranking the Cost-Effectiveness of Specialists — Are you Red, Yellow or Green?

We hope you will join us, as we expect it to be a blockbuster hit — enroll today by registering online. Watch this issue's BlueLink Tip for more information about what you can expect at the expos.

And remember, together we can build relationships for better care!

CareFirst's Member Outreach Campaign Addresses Potential Gaps in Care

CareFirst is launching a member education campaign to reinforce the importance of preventive care and remind members to schedule recommended screenings, immunizations and exams. A targeted mailer is being sent to approximately 400,000 members who have been identified through claims analysis as having gaps in care for specific to Healthcare Effectiveness Data and Information Set (HEDIS) measures.

What does this mean for you?

You may see an increase in patients requesting wellness visits. The mailer encourages members to schedule a visit with their primary care provider to discuss recommended preventive measures. Additionally, we developed a checklist tool which allows our member to create and print a customized check list for their appointment.

Visit our member website to learn more.

CareFirst Requires Prior Authorization for Genetic Tests Effective Jan. 1, 2019

CareFirst BlueCross BlueShield and CareFirst BlueChoice, Inc. (CareFirst) is working with AIM Specialty Health® to launch a genetic test prior authorization program, effective Jan. 1, 2019. The new prior authorization requirement is for the following categories of covered genetic tests for effective dates of service on or after Jan. 1, 2019:

- Reproductive Carrier Screening
- Prenatal Testing
- Rare Disease Testing
- Whole Exome/Genome Sequencing
- Hereditary Cancer Testing
- Tumor Markers categorized as genetic tests
- Hereditary Cardiac Testing
- Neurogenetic and Neuromuscular Testing
- Pharmacogenomics and Thrombophilia Testing
- Susceptibility Testing for Common Diseases

This program will help our members receive evidence-based genetic test(s) while helping providers with selecting the appropriate testing in this challenging area of medicine. Additionally, the program is intended to lower the costs of genetic testing while helping to ensure members receive all appropriate testing.

Training on how to order prior authorizations for genetic tests will be available later this year.

Health Care Policy

Effective Dates, CPT® Codes and Policy Updates for October

Our Health Care Policy department continuously reviews medical policies and operating procedures as new, evidence-based information becomes available regarding advances on new or emerging technologies, as well as current technologies, procedures and services.

The table below is designed to provide updates on changes to existing or new local policies and procedures during our review process. Each local policy or procedure listed includes a brief description of its status, select reporting instructions and effective dates. Policies from non-local accounts, such as NASCO and Federal Employee Program, may differ from our local determinations. Please verify member eligibility and benefits prior to rendering service through CareFirst on Call (Professional and Institutional) or CareFirst Direct.

Note: The effective dates for the policies listed below represent claims with date of service processed on and after that date.

Medical Policy and/or Procedure	Actions, Comments, and Reporting Guidelines	Policy Status and Effective Date
2.02.013 Transcatheter Closure of the Left Atrial Appendage	Under Policy Guidelines, added updated 2018 rationale statement. Report service using appropriate category I CPT® code. Refer to policy for details.	Periodic review and update. Effective 07/16/18
3.01.009 Attention Deficit Disorder (ADD) with or without Hyperactivity	Under Policy Guidelines, added updated 2018 rationale statement. Report service using appropriate category I CPT® code or HCPCS code. Refer to policy for details.	Periodic review and update. Effective 07/16/18

Medical Policy and/or Procedure	Actions, Comments, and Reporting Guidelines	Policy Status and Effective Date
5.01.020 Xofigo (radium-223 dichloride) Injection for Treatment of Prostate Cancer	Under Policy Guidelines, added updated 2018 rationale statement. Report service using appropriate category I CPT® code or HCPCS code. Refer to policy for details.	Periodic review and update. Effective 07/16/18
5.01.022 Steroid-eluting Implants for Sinus Surgery	Under Policy Guidelines, added updated 2018 rationale statement. Report service using appropriate category I CPT® code, category III CPT® code or HCPCS code. Refer to policy for details.	Periodic review and update. Effective 07/16/18
6.01.012 Thermography and Temperature Gradient Studies	Under Policy Guidelines, added updated 2018 rationale statement. Report service using appropriate category I CPT® code. Refer to policy for details.	Periodic review and update. Effective 07/16/18
6.01.046 Handheld Radiofrequency Spectroscopy for Intraoperative Margin Assessment During Breast Conserving Surgery	Under Policy Guidelines, added updated 2018 rationale statement. Report service using appropriate category I CPT® code. Refer to policy for details.	Periodic review and update. Effective 07/16/18
7.01.040 Cavernous Nerve Stimulation Device	Under Policy Guidelines, added updated 2018 rationale statement. Report	No further review scheduled.

Medical Policy and/or Procedure	Actions, Comments, and Reporting Guidelines	Policy Status and Effective Date
	service using appropriate category I CPT® code. Refer to policy for details.	Effective 07/16/18
7.01.092 Interspinous Vertebral Decompression Implantation for Spinal Stenosis	Under Policy Guidelines, added updated 2018 rationale statement. Report service using appropriate category I CPT® code. Refer to policy for details.	Periodic review and update. Effective 07/16/18
7.01.127 Prostatic Urethral Lift for Benign Prostatic Hypertrophy	Under Policy Guidelines, added updated 2018 rationale statement. Report service using appropriate category I CPT® code. Refer to policy for details.	Periodic review and update. Effective 07/16/18
7.01.128 Implanted and Semi-implanted Hearing Assist Devices	Under Policy Guidelines, added updated 2018 rationale statement. Report service using appropriate category I CPT® code or HCPCS code. Refer to policy for details.	Periodic review and update. Effective 07/16/18
7.01.129 Peroral Endoscopic Myotomy (POEM) for Esophageal Achalasia	Under Policy Guidelines, added updated 2018 rationale statement. Report service using appropriate category I CPT® code. Refer to policy for details.	Periodic review and update. Effective 07/16/18

Medical Policy and/or Procedure	Actions, Comments, and Reporting Guidelines	Policy Status and Effective Date
8.01.014 Lymphedema Therapy (Complex Decongestive Therapy)	Under Provider Guidelines, added updated statement. Report service using appropriate category I CPT® code or HCPCS code. Refer to policy for details.	Periodic review and update. Effective 07/16/18
11.01.064 Gene Expression Assays for Managing Prostate Cancer	Updated Policy statement and Policy Guidelines. Report service using appropriate category I CPT® code. Refer to policy for details.	Revision Effective 04/01/18
1.01.006 Ultrasound Accelerated Fracture Healing Device	Under Policy Guidelines, added updated 2018 rationale statement. Report service using appropriate category I CPT® code or HCPCS code. Refer to policy for details.	Periodic review and update. Effective 08/20/18
1.01.015A Augmentative Communication Devices	Report service using appropriate category I CPT® code or HCPCS code. Refer to policy for details.	Revision Effective 08/20/18
2.03.011A Screening for Colorectal Cancer	Revised Benefit Applications statement for early detection of colorectal cancer for adults aged 45 years and older. Report service using appropriate category I CPT® code. Refer to policy for details.	Revision and Operating Procedure Effective 08/20/18

Medical Policy and/or Procedure	Actions, Comments, and Reporting Guidelines	Policy Status and Effective Date
5.01.015 Naltrexone	Policy Title revised. Updated Description with naltrexone hydrochloride oral. Under Policy statement, added updated medically necessary criteria. Under Policy Guidelines, added updated 2018b rationale statement. Report service using appropriate category I CPT® code or HCPCS code. Refer to policy for details.	Periodic review and update. Effective 08/20/18
7.01.073 Radiofrequency Ablation of Malignant Tumors of the Liver	Under Policy Guidelines, added updated 2018 rationale statement. Report service using appropriate category I CPT® code or HCPCS code. Refer to policy for details.	Periodic review and update. Effective 08/20/18
7.01.091 Minimally Invasive Intervertebral Disc Decompression Procedures for Low Back Pain	Under Policy Guidelines, added updated 2018 rationale statement. Report service using appropriate category I CPT® code. Refer to policy for details.	Periodic review and update. Effective 08/20/18
7.01.105 Endoscopic Radiofrequency Ablation for Barrett's Esophagus	Under Policy Guidelines, added updated 2018 rationale statement. Report service using appropriate category I CPT® code. Refer to policy for details.	Periodic review and update. Effective 08/20/18

Medical Policy and/or Procedure	Actions, Comments, and Reporting Guidelines	Policy Status and Effective Date
7.01.111 Transanal Endoscopic Microsurgery (TEM)	Under Policy Guidelines, added updated 2018 rationale statement. Report service using appropriate category III CPT® code. Refer to policy for details.	Periodic review and update. Effective 08/20/18
11.01.032 Assays of Genetic Expression in Tumor Tissue to Determine Prognosis in Breast Cancer Patients	Description and Policy statements updated to reflect medically necessary and experimental / investigational indications for assays of gene expression to determine prognosis in breast cancer patients. Under Policy Guidelines, added updated 2018 rationale statement. Report service using appropriate category I CPT® code. Refer to policy for details.	Revision Effective 06/01/18
11.01.041 KRAS Mutation Analysis in Metastatic Colorectal Cancer	Under Policy Guidelines, added updated 2018 rationale statement. Report service using appropriate category I CPT® code. Refer to policy for details.	Periodic review and update. Effective 08/20/18
11.01.057 KRAS Mutation Analysis for Non-small Cell Lung Cancer	Under Policy Guidelines, added updated 2018 rationale statement. Report service using appropriate category I CPT® code. Refer to policy for details.	Periodic review and update. Effective 08/20/18

Medical Policy and/or Procedure	Actions, Comments, and Reporting Guidelines	Policy Status and Effective Date
11.01.058 Epigenetic Assay for Detection and / or Management of Prostate Cancer (ConfirmMDx®)	Updated Policy statement with medically necessary and experimental / investigational indications for epigenetic assay using DNA methylation (ConfirmMDx®) for the detection and / or management of prostate cancer. Under Policy Guidelines, added updated 2018 rationale statement. Report service using appropriate category I CPT® code. Refer to policy for details.	Revision Effective 08/20/18

New Medical Technology Updates for October

Our Technology Assessment Unit evaluates new and existing technologies to apply to our local indemnity and managed care benefit plans. The unit relies on current scientific evidence published in peer-reviewed medical literature, local expert consultants and physicians to determine whether those technologies meet CareFirst Blue Cross BlueShield (CareFirst) and CareFirst BlueChoice, Inc. (CareFirst BlueChoice) criteria for coverage. Policies for non-local accounts like NASCO and FEP may differ from our local determinations.

Please verify member eligibility and benefits prior to rendering services via CareFirst on Call (Professional or Institutional) or CareFirst Direct.

The Technology Assessment Unit recently made the following determinations:

Technology	Description	CareFirst and CareFirst BlueChoice Determination
Probuphine® (Buprenorphine Implant)	Subdermal Buprenorphine implant for the maintenance treatment of opioid dependence.	Medically Necessary for patients meeting criteria.

Technology	Description	CareFirst and CareFirst BlueChoice Determination
		HCPCS reporting code(s) J0570
Sublocade™ (Buprenorphine extended-release)	Once-monthly injectable extended-release form of buprenorphine for the treatment of patients with moderate to severe opioid use disorder.	Medically Necessary for patients meeting criteria. HCPCS reporting code(s) Q9991, Q9992
gammaCore	Non-invasive vagus nerve stimulation for the acute treatment of episodic cluster headache and migraine headache	Considered experimental / investigational HCPCS reporting code(s) E0770
Prolaris®	A prognostic assay for the stratification of risk associated with prostate cancer	Considered experimental / investigational CPT® reporting code(s) 81541

Claims and Billing

Upcoming Enhancements to the Electronic Prior Authorization Submission for Drugs

Effective Jan. 1, 2019, CVS Caremark* is upgrading its electronic Prior Authorization (ePA) submission process through the Provider Portal. The newly enhanced ePA tool makes submitting prior authorization (PA) requests easier and more convenient.

Starting on October 26, you can begin to use the upgraded tool and become familiar with the enhancements or you can choose to use the current layout. Effective Jan. 1, 2019, when you access the ePA tool, you will have to use the enhanced layout.

What Enhancements Can You Expect?

Features Overview:

- Single-screen prior authorization entry
- Collapsible panels for quick information entry and modifications
- Summary sections, alerts to help quick review and status

For More Information

Join us at one of two CareFirst Provider Engagement Expos for a live demonstration of the ePA enhancements or register for a webinar.

Event	Date	Register
CareFirst Provider Engagement Expo Sheraton Baltimore North Hotel 903 Dulaney Valley Hotel Towson, Md. 21204	October 24 9 a.m. to 4 p.m.	Register
CareFirst Provider Engagement Expo College Park Marriott Hotel 3501 University Blvd E. Hyattsville, Md. 20783	October 25 9 a.m. to 4 p.m.	Register
Webinar ePA for Drugs - An Enhanced Authorization Experience	Online	Register

If you have questions, please contact CVS Caremark at 888-877-0518 for CareFirst members. Contact CVS Caremark at 800-469-7556 for FEP members only.

*CVS Caremark is an independent company that provides benefit management services

Provider Reminders

Are You Up to Date on Best Practices and Quality Standards?

From recommending preventive care options to your patients or managing day-to-day office operations, the clinical resources on our provider website can be valuable, time-saving tools to help support your treatment plan for patients with chronic diseases.

CareFirst's Quality Improvement Council annually reviews the clinical resources and adopts nationally recognized guidelines and best practices to make sure you are informed when information changes.

Click on the links below for details on topics that can help you improve the care you provide to patients in your practice.

Quality Standards and Best Practices

General Guidelines and Survey Results		
Topic	**Website Link**	**PDF Available**
CareFirst's Quality Improvement Program Includes processes, goals and outcomes.	carefirst.com/qualityimprovement	
Clinical Practice Guidelines Includes evidence-based clinical practice guidelines for medical and behavioral conditions.	carefirst.com/clinicalresources	
Preventive Health Guidelines Includes evidence-based preventive health guidelines for perinatal care, children, adolescents and adults.	carefirst.staywellsolutionsonline.com/HealthyLiving/ServicesGuidelines/	
Accessibility and Availability of Appointments Includes medical and behavioral health accessibility and availability standards for routine care appointments, urgent care appointments and after-hours care.	carefirst.com/clinicalresources	

Care Coordination Programs		
Topic	**Website Link**	**PDF Available**
Access to Complex Care Coordination Includes instructions for making referrals for both medical and behavioral health; or call (800) 245-7013.	carefirst.com/providermanualsandguides	
Practitioner Referrals for Disease Management Includes information on how to use the services, how a member becomes eligible and how to opt in or opt out.	carefirst.com/clinicalresources	
Pharmaceutical Management		
Topic	**Website Link**	**PDF Available**
Pharmaceutical Management Includes the formulary, restrictions/ preferences, guidelines/policies and procedures.	carefirst.com/rx	
Utilization Procedures		
Topic	**Website Link**	**PDF Available**
Utilization Management Criteria Includes information on how to obtain Utilization Management criteria for both Medical and Behavioral Health.	carefirst.com/bluelink > *February 2018*	
Physician Reviewer Includes instructions on how to obtain a physician reviewer to discuss utilization management decisions for both medical and behavioral health.	carefirst.com/bluelink > *February 2018*	
Decisions about Medical and Mental Health, and Pharmacy Includes affirmative statement for anyone making decisions	carefirst.com/bluelink > *February 2018*	

regarding utilization management.		

Member Related Resources		
Topic	**Website Link**	**PDF Available**
Quality of Care Complaints Includes policies and procedures for complaints involving medical issues or services given by a provider in our network.	carefirst.com/qoc	
How to File an Appeal Includes policies and procedures for members to request an appeal of a claim payment decision.	carefirst.com/appeals	
Member's Privacy Policy Includes a description of our privacy policy and how we protect our members health information.	carefirst.com/privacy	
Member's Rights and Responsibilities Statement Outlines responsibilities to our members.	carefirst.com/myrights	

To request a paper copy of any documents listed above, please call (800) 842-5975

Professional Providers — Remember to Use the Proper Evaluation and Management Codes

When billing for an Evaluation and Management (E/M) code, please remember to use the appropriate modifiers. Using the appropriate modifiers will prevent delays in the processing of claims.

Please review the following chart:

CPT Modifier	Description of Modifier and Use
CPT Modifier 25	• CPT Modifier 25 should be used for significant, separately identifiable evaluation and management service by the same or

CPT Modifier	Description of Modifier and Use
	other qualified health care professionals on the same day of the procedure or other service • CPT Modifier 25 should be used to report a separate and distinct E/M service with non-E/M service performed on the same date
CPT Modifier 59	• CPT Modifier 59 should be used when a distinct procedural service is billed • CPT Modifier 59 should never be billed with an E/M code

If you have any additional questions, please call provider services at 800-313-2233. You can also review the information in the Professional Provider manual.

In Case You Missed It

October 11, 2018 — Colleague, Are You Located in Rockville, MD or Fairfax, VA? We Have A Training For You

October 01, 2018 — Changes to Professional Fee Schedule Effective Dec. 1

August 31, 2018 — You Are Invited to Our Upcoming Provider Engagement Expo, Don't Wait to Register