

Medical office update

July 2023

In this issue

- Behavioral health
- Zoledronic acid PA removal
- PBO expansion
- SOC expansion
- Commercial manual
- Statin therapy
- Pain management conference
- Post COVID-19 billing update
- RPM June-July updates
- HCS Medical criteria May-June

Join our email list

[Join our email list](#) in order to begin receiving bi-monthly newsletters, as well as occasional electronic communications.

Complementary vantages

On a clear day, the view from Seattle's iconic and futuristic Space Needle is breathtaking — with mountains seemingly on all sides overlooking bodies of fresh and ocean water below, a bird's eye view of the city's profile, and the commotion in its layout. While you cannot see everything, traffic patterns, points of interest and the hubbub of congestion are well within view.

This is a fitting metaphor for our relationship with those of you on the frontlines of healthcare doing the work we can only see from afar. The bird's eye view and the frontline each convey complementary vantages while informing the other. As Moda Health continues to enhance this exchange and our intersections with our providers, this newsletter is one way to create pathways that enrich the work we all do.

Improving and stabilizing our members' health and well-being guides our work and keeps us focused. We believe that you, our valued providers, are our primary means of delivering quality care, which is why building on our relationship with you enhances all involved.

- In the coming issues, we will share our vantage of 2024, and beyond, to recognize:
- More pre-licensed providers
- The expansion of resources to better integrate various specialties of care delivery
- Opportunities to hear directly from you
- And support the member's voice into treatment

We look forward to strengthening our relationship with you and make it easier for our members to access care to improve their health and well-being. This newsletter will not only inform you of what we see on the horizon, but will nurturing you as well, with self-care prompts and projections of our industry's healthcare workers. Amidst all this, we hope to hear from you directly.

We welcome your questions, and any insights, clarifications and informative facts you want to share with us. Just email ProviderRelations@modahealth.com or email me directly at jeff.olsgaard@modahealth.com.

Warmly,

Jeff Olsgaard, Moda Behavioral Health
Clinical Liaison

Zoledronic acid will no longer need prior authorization

Starting Oct. 1, 2023, zoledronic acid (Zometa, Reclast) will no longer require prior authorization. Zoledronic acid (Zometa, Reclast) will remain in the post-service claim edit (PSCE) program, which monitors and promotes appropriate use, safety and cost-effectiveness of medications. Claims are reviewed for appropriate frequency, correct units and eligible diagnosis codes. If the services billed do not meet the criteria, these claims may go under review and be potentially disallowed.

To learn more, please visit our [claim check program](#).

Unlock the power of Benefit Tracker: Get patient information fast!

Need patient information in a hurry? How about at 2 a.m.? Before calling Moda Health's Customer Service team, remember that your patients' eligibility and benefit information is just a click away. And it's available 24/7!

Benefit Tracker is a free online service that provides information about your patients' eligibility, network, copay & deductible, PCP, claims status, and much more. However, if you need to talk to a live customer service agent, you can call the number on the patient's ID card. They can answer any questions you have about your patients.

Questions?

To learn more about Benefit Tracker, please email ebt@modahealth.com or visit our [website](#).

Tezspire added to PBO infusion program

The list of medications in the Pharmacy Benefit Optimization (PBO) program is expanding.

Effective Oct. 1, 2023, the following medication will be added to the program:

Pharmacy PBO expansion (effective Oct. 1, 2023)

Brand	Generic	HCPCS
Tezspire	tezepelumab	J2356

Through the PBO program, select infused/injectable specialty medications will only be covered under the pharmacy benefit. Claims submitted under the medical benefit will be denied as provider liability. Claims for the administration of the medication should continue to be billed to the member's medical benefit. All medications require prior authorization, requested through the [CoverMyMeds](#) ePA tool.

To see a full list of current medications in the PBO program, please visit our [injectable medication program website](#).

Expanding our Site of Care medications

Starting Oct. 1, 2023, the following medications will be added to our Site of Care (SOC) program.

Site of Care (SOC) medication expansion (effective Oct. 1, 2023)

Brand	Generic	HCPCS
Tepezza	teprotumumab-trbw	J3241
Xenpozyme	olipudase alfa-rpcp	J0218
Evkeeza	evinacumab-dgnb	J1305
Somatuline Depot	lanreotide	J1930

We work with Magellan Rx for medical pharmacy management and for our provider-administered injectable/infused medication programs, which include the SOC program. The program directs members to the most cost-effective, clinically appropriate location to receive their infusion(s) of specialty medications. The medications included in the SOC program require prior authorization (PA) through Magellan Rx. The SOC program is managed within the current PA program.

To prevent any delay in care and allow Moda members enough time to transition to an alternative infusion site, SOC program requirements will be waived for the first 60-120 days (based on the medication) after prior authorization approval.

To learn more and see the full list of SOC medications, visit modahealth.com/medical/siteofcare.

Newly revised provider manual

We have recently updated our Commercial Manual for medical providers. Please visit modahealth.com/ebtweb/logonsubmit.do to view the revised manual.

Helping your patients get the most from their statin therapy

Thank you for supporting your patients in their health management. Below, we've provided a brief Q&A on the significance

of performance measures in statin therapy. Also included are patients who have cardiovascular disease and diabetes are getting the full health benefits from their statin medications.

Why are the HEDIS SPC and SPD (SUPD) measures important?

- Cardiovascular diseases are the leading cause of death globally, leading to around 32% of all global deaths annually¹.
- Atherosclerotic cardiovascular disease (ASCVD) occurs when plaque builds up in the arterial walls. It includes the following conditions: coronary heart disease (CHD), cerebrovascular disease, peripheral artery disease, and aortic atherosclerotic disease².
- Statin medications work in the liver to prevent cholesterol from forming. They help to lower LDL cholesterol and triglycerides while raising HDL cholesterol. They are recommended for many patients who have been patients with increased risk of heart attack or stroke².

Diabetes, dyslipidemia, hypertension, and history of smoking are considered CVD risk factors, which may increase the risk of one having a cardiovascular event³.

What does NCQA expect?

The NCQA measure description for SPC is:

“The percentage of males 21-75 and females 40-75 years of age with ASCVD who: 1) receive statin therapy of at least one high-intensity or moderate-intensity statin medication and 2) remain on their high-intensity or moderate-intensity statin medication for at least 80% of the treatment period.”

The NCQA measure description for SPD (or SUPD for Medicare patients) is:

“The percentage of patients 40-75 years of age with diabetes who do not have ASCVD who: 1) receive statin therapy of at least one high-intensity or moderate-intensity statin medication and 2) remain on their high-intensity or moderate-intensity statin medication for at least 80% of the treatment period.”

Two rates are reported: “Received Statin Therapy” and “Statin Adherence 80%”

You can help close gaps by doing one of the following:

- Prescribe a high or moderate-intensity statin medication to patients diagnosed with ASCVD or diabetes
- Help ensure patients are dispensing their medication timely and are confident in their treatment regimen
- Follow up with patients on statin medications to answer any questions and help resolve any prescription refill issues

Which statin medications fulfill the NCQA measure requirements?

Description	Prescription
High-intensity statin therapy	Atorvastatin 40-80 mg Amlodipine-atorvastatin 40-8mg Rosuvastatin 20-40 mg Simvastatin 80 mg Ezetimibe-simvastatin 80 mg
Moderate-intensity statin therapy	Atorvastatin 10-20 mg Amlodipine-atorvastatin 10-20 mg Rosuvastatin 5-10 mg Simvastatin 20-40 mg Ezetimibe-simvastatin 20-40 mg Pravastatin 40-80 mg Lovastatin 40 mg Fluvastatin 40-80 mg Pitavastatin 1-4 mg

Moda resources and evidence-based clinical practice ideas

Moda Health is committed to support your patients so they can live longer, healthier lives.

- Do you have a patient who struggles to manage their chronic condition or needs additional support? We offer health coaching services to all Moda Health members to help improve self-management, understand health, and set sustainable goals. To learn more, please call **855-466-7155** or email healthcoachteam@modahealth.com.
- Engage your patients in decisions about their cardiovascular healthcare. Evidence shows that including patients in decision making related to their CVD may improve the patient experience, patient satisfaction, reduce patient decisional regret, and even decrease CVD risk^{4,5}.

Sources:

¹ [https://www.who.int/news-room/fact-sheets/detail/cardiovascular-diseases-\(cvds\)](https://www.who.int/news-room/fact-sheets/detail/cardiovascular-diseases-(cvds))

² <https://www.heart.org/en/professional/quality-improvement/ascvd>

³ <https://www.uspreventiveservicestaskforce.org/uspstf/recommendation/statin-use-in-adults-preventive-medication>

⁴ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2384995/>

⁵ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3534845/>

Improve patient care for chronic pain. Sign up today!

[Sign up today](#) for the 36th Annual Chronic Pain Management Conference. The two-day virtual event, “Renewing Your

The annual conference is designed to provide best practices and support clinicians on how to successfully manage patients with chronic pain, anxiety and substance use. Topics will include:

- Effective treatment of chronic, non-cancer pain and anxiety disorders
- Tools for assessing risk in prescribing psychoactive medications
- Interview skills for this challenging group of patients
- Awareness of personal factors that impact effectiveness and practitioner well-being

Who should attend?

Clinicians, administrators and regulators interested in the advancements of managing chronic pain. Because clinical practice is best applied within a system, groups can attend as a clinical team.

The conference is brought to you by The Foundation for Medical Excellence (TFME) in partnership with The College of Physician and Surgeons of British Columbia. It is accredited for Category 1 CME, and helps satisfy the U.S. DEA requirement for training in safer opioid and sedative prescribing.

Visit the [TFME website](#) to learn more.

Reminder: Post COVID-19 billing update

We would like to remind you that the CR or CS modifiers and DR Condition Code may only be reported during a public health emergency (PHE) when a formal waiver is in place. The COVID-19 PHE ended on May 11, 2023. Please **DO NOT** submit any claims with these modifiers or condition code for dates of service on or after May 12, 2023. They will be denied unless a new formal waiver for PHE is issued.

Note that exceptions exist for [certain DME items](#) provided during the PHE and [SNF/Swing stays](#) with admission under PHE waiver prior to 5/12/23.

Clinical editing has been implemented to deny line items billed with the CR Modifier (Catastrophe/disaster related), CS Modifier (Cost-sharing waived for specified COVID-19 testing-related services that result in an order for, or administration of, a COVID-19 test and/or used for cost-sharing waived preventive services furnished via telehealth in Rural Health Clinics and Federally Qualified Health Centers during the COVID-19 public health emergency), and DR Condition Code (Disaster related) post PHE. We encourage you to review your systems and remind your staff to avoid using these modifiers and condition code for services after the PHE has ended.

Please refer to the following resources to learn more.

- [“CMS Waivers, Flexibilities, and the Transition Forward from the COVID-19 Public Health Emergency.”](#)
- [“Telehealth and Telemedicine Expanded Services for COVID-19 – Updated for Public Health Emergency Ending.”](#) (Moda Health Reimbursement Policy Manual, RPM073).

Reimbursement Policy Updates

The following table includes RPM updates for June and July 2023.

Policy

Summary of update

Reviewed in June 2023

Clarification, no policy changes:

RPM007, “Modifier 22 – Increased Procedural Services”

- Sections B.9, B.10 , & E: clarification update.
- References & Resources: 1 entry added.

RPM012, “Routine Venipuncture and/or Collection of Specimens”

- Clarified limits for 36415 per encounter and per date of service.
- Cross References: Links added.

RPM020, “Maternity Care”

- Section K.2: updated instructions for Delivery of Multiple Gestations with various combinations of delivery methods.
- Section O.1: Added information about birthing centers for Medicare Advantage claims.
- References & Resources: 3 entries added.

RPM039, “Medical Records Documentation Standards”

- Section I.5.b: Added “...either the date of delivery or...”

RPM058, “Behavioral Health Case Management & Care Coordination”

- Section A.5.a.ii.d) updated with further clarification of code selection & documentation of E/M services when combined with psychotherapy.
- Coding Guidelines: 2 entries added.

RPM074, “Additional Practice Expense Items During a Public Health Emergency (PHE) – CPT 99072”	<ul style="list-style-type: none"> References & resources: 2 entries added. Document updated with new comments related to end of Federal PHE on 5/11/2023, and some rephrasing elsewhere. 99072 was and remains not eligible for separate reimbursement, thus update not subject to 28 TAC.
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RPM076, “2021 & 2023 Updates to Evaluation and Management (E/M) Visits and Prolonged Services”	<ul style="list-style-type: none"> Section D.1 updated & D.2 added with clarification of code selection & documentation of E/M services when combined with psychotherapy. Coding Guidelines: 2 entries added. References & Resources: 2 entries added.
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Annual review:

RPM002, “Clinical Editing”	No updates. Last reviewed date updated.
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Reviewed in July 2023

Clarification, no policy changes:

RPM011, “Global Surgery Package for Professional Providers”	<ul style="list-style-type: none"> Section B.2.a.ii: Clarification of how this section relates to recent clarification/update on Modifier 22 policy for maternity codes. Cross References: 1 entry added.
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RPM046, “Colorectal Cancer Screening and Related Ancillary Services”	<ul style="list-style-type: none"> Section A.2.a: added. Medicare Advantage does not apply to Texas, not subject to 28 TAC. Section E.1.b: Clarified which type of codes appropriate to use with modifier PT. Procedure Code Table: Added column to indicate procedure codes considered valid for modifier PT; information moved from RPM037, more appropriate here. Cross References: Hyperlinks added. Minor formatting & phrasing updates.
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RPM037, “Preventive Services versus Diagnostic and/or Medical Services”	<ul style="list-style-type: none"> Section E: list of procedure codes valid for use in combination with modifier PT moved to RPM046. Cross References: Hyperlinks added.
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Policy Summary of update

RPM043, “Hospital Routine Supplies and Services”	<ul style="list-style-type: none"> Sections B.2.c & B.7 added. Coding Guidelines: 1 entry added. Cross References: 3 entries added. Hyperlinks added. References & Resources: 1 entry added.
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RPM038, “Computer Assisted Navigation”	<ul style="list-style-type: none"> Clarification added: Definitive surgical procedure is to be billed as the primary surgical code with the bulk of the billed charges, not a line item with add-on code 0055T or other code for CAN. Minor rephrasing; no content changes. Cross References: Hyperlinks added.
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RPM066, “DRG Payment With Patient Transfers”	<ul style="list-style-type: none"> Section D.4 added. Coding Guidelines & Sources: 1 entry added. Minor formatting fixes (font size inconsistencies). No content changes.
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Annual review:

RPM005, “Records Fees, Copying Fees”	<ul style="list-style-type: none"> Cross References: Hyperlink added. Spacing fixed.
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RPM047, “Facility Reimbursement of Respiratory Therapy Services”	<ul style="list-style-type: none"> Definition of Terms: 1 entry definition enhanced for clarification. Cross References: Hyperlinks added. Minor formatting corrections and minor rephrasing.
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RPM064, “Modifiers PO & PN - G0463 Clinic Visit Services at Excepted Off-Campus Provider-Based Outpatient Department - Medicare Advantage”	<ul style="list-style-type: none"> Minor rephrasing: Fixed initial listing of acronym PBD to include full phrase. Changed "Moda Health" to "Our...plans". No content changes.
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RPM067, "Level of Care Review"

Minor formatting (spacing) improvements. No content changes.

RPM070, "Modifier SU - Procedure Performed in Physician's Office (Facility and Equipment)"

- Minor rephrasing.
- Definition of Terms: Both definitions updated.
- References & Resources: 5 entries added.
- Ready for July RAPR.

Medical Necessity Criteria updates

The following table includes medical criteria updates for April 2023.

Criteria	May 2023 Medical Criteria Summary	Pharmacy/medical
Continuous glucose monitoring	Introduction: This is an annual review Criteria changes: CPT codes list updated.	Medical
Intervertebral disc prosthesis	Introduction: This is an annual review Criteria changes: No changes	Medical
Micronutrient testing	Introduction: This is an annual review Criteria changes: No changes	Medical
Monochromatic infrared energy therapy	Introduction: This is an annual review Criteria changes: Grammar changes	Medical
Spinal pain injections	Introduction: This is an annual review Criteria changes: Updates to align with eviCore, including listing the provocative tests; updated activity modification language. Added the language: No more than four injections per SI joint are performed within a 12-month period	Medical
Thermography	Introduction: This is an annual review Criteria changes: No changes	Medical
Urinary incontinence	Introduction: This is an annual review Criteria changes: Grammar updates	Medical
Vagus nerve stimulation	Introduction: This is an annual review Criteria changes: Added indications to the investigational list	Medical
Magnetic resonance (MR)-guided focused ultrasound for essential tremors	New criteria: Magnetic resonance-guided focused ultrasound (MRgFUS) is a non-invasive way to treat benign and malignant tumors. It is a procedure that coverage will be considered for members with medicine-refractory essential tremors. Essential tremors is a nervous system condition, that causes involuntary and rhythmic shaking.	Medical

Criteria	June 2023 Medical Criteria Summary	Pharmacy/medical
Air ambulance	Introduction: This is an annual review Criteria changes: No changes	Medical
Breast implant removal	Introduction: This is an annual review Criteria changes: Added indications to the investigational list	Medical
Corneal collagen-treatment of keratoconus	Introduction: This is an annual review Criteria changes: pdated the wording 'progressive' keratoconus, 'corneal keratectasia following refractive surgery'.	Medical

Medical nutrition therapy-nutritional counseling	Introduction: This is an annual review Criteria changes: No changes	Medical
Spinal cord stimulators	Introduction: This is an annual review Criteria changes: No changes	Medical
Temporomandibular joint (TMJ) nonsurgical treatment	Introduction: This is an annual review Criteria changes: added indications for restricted range of motion.	Medical
Genetic testing	Introduction: This is an annual review Criteria changes: No changes	Medical
Obesity: Surgical management	Introduction: This is an annual review Criteria changes: Added a section that includes guidelines for bariatric surgery among adolescents. These include obesity classification, mental health evaluation, weight loss attempts through conservative methods, and surgery location required to be an accredited center.	Medical

Contact us

Moda Health Medical Customer Service

For claims review, adjustment requests and/or billing policies, please call 888-217-2363 or email medical@modahealth.com.

Provider Updates

For provider demographic and address updates, please email providerupdates@modahealth.com.

Moda Provider Relations

For escalated claim inquiries, contract interpretation, educational opportunities or onsite visit requests please email providerrelations@modahealth.com

Credentialing Department

For credentialing questions and requests, please email credentialing@modahealth.com.



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