Skin Substitutes Policy

Following the review and evaluation of services billed for skin substitutes (bioengineered skin substitutes or human skin equivalents), the Health Plan is reiterating the importance of billing HSE Apligraf® and Dermagraft® services in accordance with policy Pay.083. Skin substitutes may be considered if standard wound care procedures have had little effect on wound healing.

In addition, providers should keep at least a minimum amount of clinical documentation in their records, including the diagnosis and the ulcer size, duration, location, and extent, and should indicate that prior conventional non-surgical therapy was attempted.

Should you have any questions about this policy, please contact your Network Management representative.
PHYSICIAN PARTNER

Update

Maintenance Medication Initiative for UPMC for Life Specialty Plan, UPMC for You, and UPMC for Community Living Members

UPMC Health Plan is promoting a 90-day retail pharmacy initiative for our UPMC for Life Specialty Plan, UPMC for You, and UPMC for Community Living members who take maintenance medications.

Highlights of the initiative include:
- Offers financial savings for members (90-day supply for the cost of one copayment, which is a savings of two months’ copayments)
- Supports members’ compliance in taking their maintenance medications

The Health Plan will also be sending letters to our UPMC for Life Specialty Plan, UPMC for You, and UPMC for Community Living members about this pharmacy initiative.

Please note: As this program unfolds, our members may be contacting your office to inquire whether their medication(s) qualify for this pharmacy benefit.

We would like to thank you in advance for your cooperation, which is essential to the success of this program, and to encourage you to provide a 90-day prescription for maintenance medications whenever possible. If you have any questions, please contact Provider Services at 1-866-918-1595 or your Network Management representative.

Bidwell Training Offers Electronic Record Medical Assistant (ERMA) Program

This is the first in a series of communications regarding this exciting ERMA degree program.

Bidwell Training Center, in partnership with UPMC Health Plan, is launching an Electronic Record Medical Assistant (ERMA) training program designed to meet the growing need for employees who can skillfully navigate the Electronic Health Record System. The U.S. Bureau of Labor Statistics’ Occupational Handbook, 2010-11, predicts that the Medical Records and Health Information Technicians occupation will experience a 20% increase and the Medical Assistant occupation, a 34% increase, during the decade of 2008 to 2018. Implementation of the electronic health record is widely viewed as being among the most valuable tools for reducing health care costs and increasing efficiency. It is quickly becoming the industry’s standard method of recording and monitoring patient data.

This exciting new 10-month diploma program uses simulative technology to provide one of the most sophisticated medical assistant training programs available. The ERMA major is further augmented by providing students with 112 hours of instruction dedicated to mastering the electronic health record.

Applicants must possess a high school diploma or GED, obtain acceptable scores on Bidwell’s battery of assessment tests, successfully interview with the admissions panel, and submit an ACT 33 Clearance.

Course Length 30 weeks, 900 hours (didactic)
4 weeks, 160 hours (externship)

Class Schedule Monday through Friday, 8:30 a.m. to 2:55 p.m.

Course Outline

<table>
<thead>
<tr>
<th>Courses</th>
<th>Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anatomy &amp; Physiology Medical Terminology I-IV</td>
<td>150</td>
</tr>
<tr>
<td>Clinical Procedures and Lab Techniques I-IV</td>
<td>150</td>
</tr>
<tr>
<td>Coding I &amp; II</td>
<td>75</td>
</tr>
<tr>
<td>Communications &amp; Professional Skills I-III</td>
<td>112.5</td>
</tr>
<tr>
<td>Electronic Health Records</td>
<td>112.5</td>
</tr>
<tr>
<td>Fundamentals of Medical Assisting</td>
<td>112.5</td>
</tr>
<tr>
<td>Keyboarding</td>
<td>37.5</td>
</tr>
<tr>
<td>Mathematics</td>
<td>37.5</td>
</tr>
<tr>
<td>MS Word &amp; Excel</td>
<td>75</td>
</tr>
<tr>
<td>Pharmacology</td>
<td>37.5</td>
</tr>
<tr>
<td>Externship</td>
<td>160</td>
</tr>
</tbody>
</table>

Total Clock Hours 1,060

For more information on Bidwell Training Center’s Electronic Record Medical Assistant’s program, please visit their website at www.bidwell-training.org or call 412-323-4000 ext. 150.
UPMC for You — Provider Pay for Performance Program

UPMC for You is introducing the 2010 Provider Pay for Performance (P4P) program developed in conjunction with the Pennsylvania Department of Public Welfare. This program is in effect January 1 through December 31, 2010.

The design of the UPMC for You Provider P4P program provides additional financial incentives to primary care physicians who focus on primary care visits, lead screening, asthma care, and key diagnostic tests associated with the management of diabetes. The metrics for the UPMC for You Provider P4P plan as it applies to your practice are:

- Annual Well Visits
- Lead Screenings
- Asthma (The flu vaccine has been removed from this metric.)
- Diabetes
- Annual Emergency Room Utilization (New for 2010)
- Annual Readmission Utilization (New for 2010)

Note: Combo II Immunizations have been removed from the program.

Contact your physician account executive with any questions you may have.

Quality Incentive Rewards Program

UPMC Health Plan implemented the Partners Program in 2008 to help support primary care physicians in managing the care of their patients. The program is built on the patient-centered medical home (PCMH) model, which places the patient and physician at the center of care, with supporting roles for family members, the community, and the Health Plan to more effectively meet the needs of members and patients.

One of the program’s key components is the Quality Incentive Rewards Program (QIRP). Based on UPMC Health Plan’s ongoing evaluation of the program, plus input from primary care physicians who attended the Physician Advisory Board meetings held in fall 2009, we revised QIRP measures effective April 1, 2010. The first reports and incentive results, based on these new measures, will be generated in September and October 2010.

Components that were maintained include:
- Measures are still in two categories: Quality and Efficiency; and
- Results and reporting will continue to be at a site level.

An overview of components that will be modified include:
- Population for measurement:
  - UPMC for You members will no longer be included in the QIRP program.
  - PPO members will be included in the QIRP program.
- Member gap-in-care rosters will be 6 months prospective.
- Measures, goals, and scoring:
  - The overall incentive scale will be based upon 100 maximum points.
  - Goals 1, 2, and 3 are based on the network average for each measure.
- PCMH assessment level:
  - Points will be awarded based on PCMH level.

Product Recall — Boston Scientific Implantable ICD and CRT-D Devices

Boston Scientific Corporation has announced that they have stopped shipment and are retrieving field inventory of all their implantable cardioverter defibrillators (ICDs) and cardiac resynchronization therapy defibrillators (CRT-Ds).

Boston Scientific has determined that two instances of manufacturing process changes, while successfully validated, were not submitted for approval to the FDA. The company has no indication that these manufacturing process changes pose any risk to patient safety and is not recommending explantation of the devices.

Product families included in this advisory include: Cognis®, Confient™, Livian™, PRIZM™, RENEWAL®, Teligen®, and Vitality™. The company’s pacemakers and other products are not affected by this advisory.
The Technology Assessment Committee meets regularly to review medical technology. The following chart details recent committee decisions. Please refer to the designated policy for complete indications and limitations.

<table>
<thead>
<tr>
<th>Subject</th>
<th>Reason for Review</th>
<th>UPMC Health Plan Summary</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical Trials and Use of IDEs and HDEs</td>
<td>Policy Review</td>
<td>Required to use Diagnosis Code V70.7 when submitting claims. Services will require a prior authorization. UPMC Health Plan must be notified of patients who are part of a clinical trial. When notifying UPMC Health Plan, providers must submit a fiscal review form and all codes that will be submitted. Please see the following policies for details – MP. 078 and MP. 079.</td>
</tr>
<tr>
<td>HERMark® Breast Cancer Assay</td>
<td>Clinical Review</td>
<td>Considered experimental and investigational for all products.</td>
</tr>
<tr>
<td>KRAS Mutation Testing</td>
<td>New Pay Policy</td>
<td>Code S3713 must be used for this test. This is covered for Commercial, Medicare, and CHIP products, but not covered for Medical Assistance.</td>
</tr>
<tr>
<td>Telephonic Pacemaker Checks</td>
<td></td>
<td>A correction to last month’s APU regarding Transtelaphonic Monitoring of Cardiac Pacemakers - CPT 93293 - Frequency guidelines for telephonic monitoring must be according to Medicare specifications as outlined in LCD L30529 for Cardiac Rhythm Device Evaluations.</td>
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</tbody>
</table>