Medicaid Benefit Design Changes Announced

UPMC for You, Inc., will introduce benefit design changes for some members, effective April 1, 2010. Some of the benefit design changes are similar to the benefit limitations adopted by the Department of Public Welfare (DPW). The benefits listed below represent specific revisions to the UPMC for You product.

Based on the member’s benefit category of assistance, he or she may have an eighteen (18) visit limit per year, six (6) prescription limit per calendar month, or copayments for some services.

- Limits do not apply to members under the age of 21.
- Copayments do not apply to members under the age of 18.
- Copayments and limits do not apply to pregnant women (including through the post-partum period), nursing facility residents, members who reside in an Intermediate Care Facility for the Mentally Retarded and Other Related Conditions, and recipients eligible under the Breast and Cervical Cancer Prevention and Treatment Programs, Title IV-B Foster Care and IV-E Foster Care, and Adoption Assistance.
- Pharmacy limits only apply to members in the General Assistance benefit category if they have not met one of the exceptions listed above.

Providers are required to collect applicable copayments for services rendered; however, you may not deny services if the member cannot pay the copayment. The member is still liable for the copayment and you may attempt to collect the copayment by billing the member for the overdue amount. Providers may not waive the copayment requirement.

UPMC Health Plan Invites Pediatric Offices to Attend

We Can! Pittsburgh Regional Training Event
Tuesday, April 27, and Wednesday, April 28, 2010
Marriott Pittsburgh City Center

We Can! (Ways to Enhance Children’s Activity & Nutrition), developed by the National Institutes of Health (NIH), is a fast-growing national movement of families and communities coming together to promote healthy weight in children ages 8-13 through improved food choices, increased physical activity, and reduced screen time (television and computers).

We Can! recognizes the important relationship that health professionals have with parents and families. Parents often turn to health professionals for accurate information and guidance regarding their child’s health. This training will help you learn the basics of We Can!, provide various resources and materials, and allow you to network with others in hospitals and health systems, public health departments, youth-serving organizations, and other organizations around the region.

To learn more about We Can! communities, partners, and resources, visit http://wecan.nhlbi.nih.gov.

To learn more about We Can! Pittsburgh, visit www.upmchealthplan.com/about/wecan.html.

To add your name to the invitation list, please send an e-mail to Michelle Tallman at tallmanml@upmc.edu.
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.

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.

Application of Topical Fluoride Varnish

Re: Office of Medical Assistance Programs — Bulletin # 09-10-08, 31-10-08

The purpose of the referenced bulletin is to notify Medical Assistance (MA) enrolled physicians and independently practicing certified registered nurse practitioners that effective April 1, 2010, the Department of Public Welfare will make payments for the application of topical fluoride varnish when provided to MA-eligible children under the age of five. Topical fluoride varnish treatment costs are paid in addition to the fee for an office visit on the same date of service.

Tooth decay is the single most common and most easily preventable chronic childhood disease. The application of topical fluoride varnish for children has been documented to be safe and effective in preventing dental decay. Children who do not receive fluoride varnish treatments are more than twice as likely to develop tooth decay.

Providers enrolled in MA with UPMC Health Plan should direct procedure, coding, and payment questions to Provider Services at 1-866-918-1595.

UPMC Passavant and Project RED

In the spring of 2010, UPMC Health Plan and UPMC Passavant will begin collaborating to offer patients a “Re-Engineered Discharge (RED).” Named Project RED, this patient-centered, quality improvement project focuses on the complex hospital discharge process. The initiative has four goals:

- Improve quality of care for patients
- Decrease readmission rates
- Decrease adverse events after discharge
- Increase follow-up activity with primary care physicians and specialists

Approximately 50% of UPMC Health Plan members admitted to UPMC Passavant will be randomly chosen to participate in this new program. Two full-time registered nurses who are Health Plan Discharge Advocates will be working seven days a week on-site at UPMC Passavant. The nurses will introduce themselves to patients at the beginning of a hospital stay and will monitor patients’ progress until 3 days after discharge. The Discharge Advocates’ duties will include, but will not be limited to, ongoing medication reconciliation, scheduling follow-up appointments for patients after discharge, educating patients on their diagnosis and medications, and compiling a written, personalized discharge plan.

This written discharge plan, known as an After Hospital Care Plan, or AHCP, is a key component of Project RED. The AHCP will be given to patients at discharge. This plan is an easy-to-read summary of the information in the patients’ discharge instructions, such as when and where their follow-up appointments are, information about their medications, and telephone numbers to call if they encounter any problems. The patients will be asked to take their plan, which is an organized and reliable source of information, with them to all follow-up appointments with providers. Questions about Project RED can be directed to Dr. S. Ramalingam, Senior Medical Director, UPMC Health Plan, at 412-454-5702.

Rotarix Vaccine: Update to Clinicians and Public Health Professionals

The FDA is recommending that health care professionals temporarily suspend the use of Rotarix, a vaccine used to prevent rotavirus disease. The FDA stated its recommendation is a precautionary measure while they learn more.

The DNA from porcine circovirus type 1 (PCV1) is present in Rotarix. PCV1 is not known to cause disease in humans, and there is no evidence at this time that it poses a safety risk. Because available evidence supports the safety of Rotarix, no medical follow-up is needed for patients who have been vaccinated with Rotarix.

There are two licensed vaccines for rotavirus in the United States: RotaTeq and Rotarix. For children who have received one dose of Rotarix, the CDC advises that clinicians complete the series with RotaTeq for the next two doses.

Additional information, including information for health care professionals and parents, is provided at the document link below.

Read the complete MedWatch: The FDA Safety Information and Adverse Event Reporting Program summary, including the Update on Rotarix, which is linked to the summary, at:

New Physician Office Resource on the Web

The Partners Program Quality Incentive Rewards Program information is now on the UPMC Health Plan website. It can be accessed through the “Providers/Partners Program” link on our homepage. The following sections are found in this location:
• Pay for Performance Overview
• Principles of Patient-Centered Medical Home
• Quick Reference Guide: Lifestyle Measures
• HEDIS Measures Summary

Watch for updates to this information, including the new measures for 2010.

Provider OnLine Chat Available Soon

A new way to contact UPMC Health Plan — online chat — will be added as a feature to the Provider OnLine secure website in mid-April. UPMC Health Plan partnered with Genesys®, an Alcatel-Lucent company, to develop this chat feature, which connects providers and their staff with the right resources to fulfill requests, optimize care goals, and efficiently use resources.

Through an easy-to-use Web interface, Provider OnLine users will be connected to a UPMC Health Plan Provider Services representative located in Pittsburgh. During the chat session, users can type questions and receive responses in real time.

This technology allows your staff members — through real-time Web sessions — to get assistance with everything from member eligibility questions to procedure code coverage and authorization requirements. (Claims inquiries will continue to be most efficiently handled using the “compose” secure message feature available on each claim screen.)

By having provider information at their fingertips, our representatives can get to the heart of your problem and work quickly to get it resolved — providing you with convenience and premium customer service. In addition, the Genesys product’s industry-leading security ensures that provider- and member-sensitive data remains private. This feature is one more way UPMC Health Plan demonstrates that it is both a member- and provider-focused health plan.

Chat will be available from 8 a.m. to 5 p.m. If you have questions regarding this service, contact Provider Services at 1-866-918-1595.

Enteral Feedings Policy Reminder

UPMC Health Plan requires an authorization for enteral feedings for all lines of business.

The link to the policy for Nutritional Products, including enteral products, can be found at http://www.upmchealthplan.com/pdf/PandP/MP%20054%20Nutritional%20Products%20Ver%20May%2009.pdf.

For questions regarding this policy, contact Provider Services at 1-866-918-1595 or your Network Management representative.

PRODUCT/Recall — OneTouch SureStep Test Strips (LifeScan)

LifeScan and the FDA notified health care professionals of a voluntary recall of eight lots of OneTouch® SureStep® Test Strips, which are used by people with diabetes to measure their blood glucose levels at home. The test strips are being recalled because they may provide falsely low glucose results when the glucose level is higher than 400 mg/dL.

If patients use the falsely low test results to determine their insulin dose, they may give themselves too little insulin, which could result in poor blood glucose control. High blood glucose must be recognized and treated promptly to avoid very serious complications, such as coma and death.

The eight lots of consumer OneTouch SureStep Test Strips being recalled are identified in the firm’s press release. You can find it at http://www.fda.gov/Safety/Recalls/ucm202119.htm.

Lot numbers are located on the outer carton and test strip vial. LifeScan estimates approximately 14,000 of the 50- and 100-count packages of consumer OneTouch SureStep Test Strips were distributed nationwide between August 1, 2009, and January 28, 2010.

It is important that patients with recalled test strips continue to test their blood glucose. Patients with access to a meter that does not use OneTouch SureStep Test Strips should use this other meter to test their blood glucose until replacement product from LifeScan arrives. If an alternate meter is not available, patients may continue to test using the recalled OneTouch SureStep Test Strips. However, if patients obtain results above 400 mg/dL, they should contact their health care professional for further instructions because their glucose may be significantly higher.
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>HPV vaccine</td>
<td>Policy Review</td>
<td>Effective 4–1–10, covered for males in addition to females for quadrivalent HPV vaccine. The bivalent HPV vaccine will be denied for all products.</td>
</tr>
<tr>
<td>Kidney disease education</td>
<td>Policy Review</td>
<td>Codes G0420 and G0421 are covered when billed with ICD-9 code 585.4 (Chronic Kidney Disease Stage 4) for all products except Medical Assistance. A 6-session maximum is allowed per beneficiary lifetime.</td>
</tr>
<tr>
<td>Transtelephonic rhythm strip pacemaker evaluations</td>
<td>Policy Review</td>
<td>Codes 93292 and 93280 - maximum allowance of two times during the first six months and then once per year.</td>
</tr>
<tr>
<td>Lap band adjustments</td>
<td>Policy Review</td>
<td>Effective 4–1–10, code S2083 has a maximum allowance of three per year for commercial members when medically necessary. Code 43999 must be billed with a diagnosis code of V53.51 when medically necessary for Medicare members.</td>
</tr>
<tr>
<td>Cellular therapy</td>
<td>Clinical Review</td>
<td>Considered experimental and investigational for all products.</td>
</tr>
<tr>
<td>Gastric freezing for peptic ulcer disease also referred to as intragastric hypothermia</td>
<td>Clinical Review</td>
<td>Considered experimental and investigational for all products.</td>
</tr>
<tr>
<td>Peridex filter set for home continuous peritoneal dialysis</td>
<td>Clinical Review</td>
<td>Considered experimental and investigational for all products.</td>
</tr>
<tr>
<td>Medtronic Melody® Transcatheter Pulmonary Valve and Ensemble® Transcatheter Valve Delivery System</td>
<td>Clinical Review</td>
<td>Covered only as a Humanitarian Device Exemption (HDE).</td>
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