

Fee Schedule Updates

On Jan. 1, 2015, HealthChoice and the Department of Corrections (DOC) updated the CPT/HCPCS, Outpatient Facility (OP), Ambulatory Surgery Center (ASC), American Society of Anesthesiologists (ASA), and American Dental Association (ADA) fee schedules. Additionally, significant fee schedule updates will become effective April 1, 2015.

HealthChoice and DOC provide fee schedule updates on Jan. 1 of each year that reflect added, changed and deleted codes; however, the comprehensive annual fee schedule update occurs on April 1 of each year. This allows time for the Centers for Medicare & Medicaid Services (CMS) to finalize and post its fee schedules. The next scheduled updates are:

- Feb. 1 — Add, change and delete codes for ASA
- April 1 — Comprehensive fee schedule update for CPT/HCPCS, OP, ASC and ADA

Fee schedule updates are reported in each issue of the *Network News* newsletter which is distributed quarterly to all Network Providers. Updates are also posted to the provider websites. We encourage you and your staff to reference the website of your provider network for the most recent fee schedule updates and other important information.

If you have questions, please contact the Network Management Unit by calling 1-405-717-8790 or toll-free 1-800-543-6044, or send email inquiries to: EGID.NetworkManagement@omes.ok.gov or EGID.DOCNetworkManagement@omes.ok.gov.

HealthChoice and DOC Adopt New Guidelines for Observation Stays

For charges incurred on or after April 1, 2015, HealthChoice and the Department of Corrections will adopt new guidelines for observation stays as follows:

1. Observation stays of 47:59 hours or less
 - ◆ Certification is not required;
 - ◆ Charges must be billed as outpatient services; and
 - ◆ Charges for a subsequent inpatient admission must be combined with charges for the observation stay, and all charges must be billed as inpatient services.
2. Observation stays of 48:00 hours or longer
 - ◆ Observation stays that are longer than 48 hours are not covered; however, if charges for room and board are billed, certification is required by the certification administrator; and
 - ◆ Charges for room and board must be billed as inpatient services.
3. Observation stays through the emergency room or for scheduled/not-scheduled outpatient surgery must be billed as outpatient services, unless charges for room and board are billed, then charges should be billed as inpatient services.

If you have any questions regarding a HealthChoice certification, or to request certification, please contact the certification administrator toll-free at 1-800-848-8121.

If you have questions regarding the change in benefit, please do not hesitate to contact our medical claims administrator at 1-405-416-1800 or toll-free 1-800-782-5218.

ICD-10 Code Implementation

HP Administrative Services, LLC (HP) has a detailed timeline for the implementation of ICD-10 codes by the Oct. 1, 2015, compliance date. Claims for services provided on or after this date must use ICD-10 codes for medical diagnosis, inpatient procedures, outpatient services and other services that require diagnosis codes. Claims with service dates prior to Oct. 1, 2015, must use ICD-9 codes.

HP has adopted an Analyze-Build-Test approach to implementing ICD-10 codes for EGID. Following is an implementation update:

Development Phase

During this phase, HP loaded a test region with the ICD-10 code set and configured it using CMS General Equivalency Mapping (GEM) recommendations. This phase is repeating with updates made on a rolling basis to achieve expected testing outcomes.

Testing Phase

This phase includes internal testing of configuration changes and local changes, as well as end-to-end testing by HP. External testing follows internal testing and includes participation by EGID providers, third parties and vendors.

Implementation Phase

The Implementation Phase is under construction at this time.

Providers are encouraged to participate in ICD-10 testing by contacting their clearinghouse for test and compliance procedures. Early participation in the testing phase will allow all parties to address ICD-10 related issues ahead of the Oct. 1, 2015, compliance date.

Claims that Span the ICD-10 Implementation Date

Please be aware that HealthChoice, the Department of Rehabilitation Services, and the Department of Corrections will adopt the guidelines developed by CMS for handling claims with dates of service (DOS) that span the ICD-10 code implementation date of Oct. 1, 2015.

For specific claim filing guidelines, please visit the following link to the CMS website: www.cms.gov/outreach-and-education/medicare-learning-network-mln/mlnmattersarticles/downloads/SE1408.pdf.

If you have any questions, please contact our medical claims administrator at 1-405-416-1800 or toll-free 1-800-782-5218.

ICD-10 Testing Requested

Testing is crucial to the impending Oct. 1, 2015, ICD-10 implementation deadline. The testing process will aid in the smooth transition to claims processing under the new coding guidelines.

Please do not wait to submit test claims as this may ultimately cause delays in the accurate and timely processing of your claims. Providers should begin the ICD-10 testing process now so any ICD-10 related claim issues can be resolved before the Oct. 1 deadline arrives.

Contact your clearinghouse now to begin the ICD-10 testing process. You can test directly with Emdeon Business Services LLC® Testing Exchange or Nuesoft Technologies, Inc., or if you use a different

clearinghouse, please contact them and ask that they work directly with Emdeon or Nuesoft to test natively coded ICD-10 claims.

Medicare Preventive Services

CMS has updated their list of preventive services for 2015. An information booklet, *Your Guide to Medicare's Preventive Services*, is available at www.medicare.gov/Pubs/pdf/10110.pdf. Please call 1-800-633-4227 or visit www.medicare.gov for the most current information.

ESI Advantage Plus Authorization Program

Beginning Jan. 1, 2015, HealthChoice adopted the Express Scripts Advantage Plus Prior Authorization Program for all its plans, except the Medicare supplement plans with Part D.

This program updated our current Prior Authorizations (PAs) guidelines and introduced new PA programs to several classes of medications. The new program will also ensure our PA guidelines are routinely updated to reflect the most current clinical recommendations and the availability of new medications.

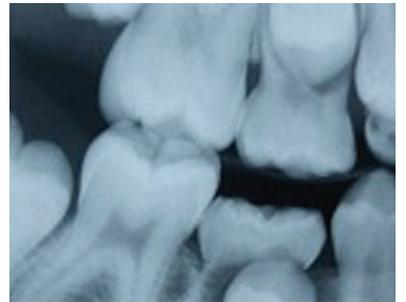
This new program applies only to PAs related to access and does not involve any new Step Therapy limitations.

If you have any questions related to the new PA program, or if you would like to initiate a new PA for a patient, please contact the Express Scripts Prior Authorization department toll-free at 1-800-753-2851.

Dental and Endodontic Fee Schedule Update for 2015

For all charges incurred on or after Jan. 1, 2015, HealthChoice and the Department of Corrections (DOC) have updated the dental and the endodontic fee schedule with code changes implemented by the American Dental Association. The Allowable Fees have also been updated.

For the most current fee schedule, please visit the HealthChoice website at www.healthchoiceok.com/providers or the DOC website at <https://gateway.sib.ok.gov/DOC> or contact Network Management at 1-405-717-8790 or toll-free 1-800-543-6044. Email inquiries can be sent to EGID.NetworkManagement@omes.ok.gov.



New Clearinghouse Available for ERAs and Claims

Would you like to receive your explanation of benefits via electronic remittance advice (ERA), but you use a clearinghouse that does not coordinate with HealthChoice?

In addition to Emdeon Business Services, HealthChoice is now working with Nuesoft Technologies, Inc. to handle ERAs and claims. Nuesoft has been successfully operating for more than 10 years and has a strong foothold in the transmission of electronic medical data.

For additional information or to sign up for ERA, please visit our website at www.healthchoiceok.com/providers or you can contact Network Management at 1-405-717-8790 or toll-free 1-800-543-6044. Email inquiries can be sent to EGID.NetworkManagement@omes.ok.gov.

Attention All Providers

Providers will receive one 1099 for each tax identification number (TIN). If you share a TIN with other providers, there will still be only one 1099 sent. This form will be addressed to the name registered with the Internal Revenue Service and mailed to the address indicated on your Form W-9.

If you have questions regarding your 1099, please contact our medical and dental claims administrator by calling 1-405-416-1800 or toll-free 1-800-782-5218.

Always Get the Most Current Fee Schedule Information

In order to guarantee you are viewing the most current fee schedule information on our website, be sure to refresh your screen.

For Internet Explorer users, simply press <F5> while on our fee schedule Web page.

HealthChoice and HP Complete Phase III CORE Certification

The Employees Group Insurance Division of the Office of Management and Enterprise Services is pleased to announce that HealthChoice and HP Administrative Services, LLC (HP) have achieved CAQH® Committee on Operating Rules and Information Exchange (CORE®) Phase III Certification.

CAQH is a non-profit alliance of health plans and trade associations that are committed to the development and adoption of national operating rules for coverage-related administrative transactions. Its mission is to promote quality interactions between plans, providers and other stakeholders, reduce costs associated with health care administration, facilitate the exchange of administrative health care information, and encourage the integration of administrative and clinical data.

CORE Phase III certification ensures health care organizations and providers can electronically exchange and access patient coverage information with HealthChoice and HP according to CORE rules. Regardless of the technology, CORE rules are based on national standards, including HIPAA, which make the transmission of electronic data progressively more streamlined, seamless and predictable.

Now that HealthChoice and HP have achieved CORE certification, HealthChoice providers have the ability to electronically access consistent and accurate administrative data, such as eligibility, benefits, claims' status and coverage information which will help to eliminate phone calls and paperwork for the office staffs of our providers.

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Update to Laboratory Screenings and Confirmations

For charges incurred on or after April 1, 2015, HealthChoice and the Department of Corrections (DOC) will cover only the following laboratory urine drug screenings when medically necessary screening tests are required:

- 80300 – Drug screen, any number of drug classes from Drug Class List A; any number of non-TLC devices or procedures (e.g., immunoassay) capable of being read by direct optical observation, including instrument-assisted when performed (e.g., dipsticks, cups, cards, cartridges), per date of service.
- G0434 – Drug screen, other than chromatographic; any number of drug classes, by CLIA waived test or moderate complexity test, per patient encounter.

Clinical editing applies.

Note: No other Definitive Drug Testing and Presumptive Drug Class Screening CPT codes are covered.

If you have any questions regarding this change, please contact our health claims administrator at 1-405-416-1800 or toll-free 1-800-782-5218.

Filing Claims for Home Infusion Therapy

If you are a provider of home infusion therapy, when you file claims, please include accurate information related to the services rendered. This includes the appropriate place of service and billing codes.

HealthChoice cannot provide assistance with how to bill a claim; however, all claims are reviewed for billing accuracy, including claims with billing codes S9490 through S9810.

Please note that home infusion therapy requires certification through our Health Care Management Unit (HCMU). If you have questions regarding the certification process or to request certification, please contact HCMU at 1-405-717-8879 or toll-free 1-800-543-6044.

Correction to Printed Version of Fall Issue

In the fall issue of the *Network News*, there was an error on page three of the printed version. The article, *Formulary Changes for 2015*, included a list of medications being removed from the HealthChoice Select Medication List. The medications Euflexxa®, Gel-One®, Hyalgan®, Supartz®, Monovisc®, Orthovisc®, Synvisc®, and Synvisc-One® should not have been included in the chart. Effective Jan. 1, 2015, these medications are covered under medical benefits instead of pharmacy benefits.

This error did not impact the electronic version of this newsletter.

If you have any questions regarding the HealthChoice Select Medication List, please contact our pharmacy benefit manager toll-free at 1-800-903-8113. TDD users call 1-800-825-1230.

In-Home Sleep Studies

For charges incurred on or after Jan. 1, 2015, HealthChoice covers medically necessary sleep studies performed in the home. Guidelines are as follows:

- The study must involve a minimum of four channels (including oxygen saturation, respiratory movement, airflow and electrocardiogram); and
- The member or dependent must be age 18 or older.

Certification is not required for these sleep studies.

If you have any questions about this, or any HealthChoice Plan benefit, please contact our medical and dental claims administrator by calling 1-405-416-1800 or toll-free 1-800-782-5218.

Tips for Submitting Claims

For the quickest claims processing, submit claims electronically or through ClaimLink.

If you consistently have issues with claims that do not process timely, please verify the format your intermediary or clearinghouse uses to submit your claims. Make sure they are filing your claims electronically and not on paper because it takes much longer to process paper claims.

Use the current claim form to expedite claims processing. Accepted claim forms include the ADA 2012*, CMS 1500 (02-12) and UB-04.

If we request additional documentation to process a claim or if you need to file a corrected claim, please submit the information or corrected claim to:

HP Administrative Services, LLC
P.O. Box 24110
Oklahoma City, OK 73124-0110

When you submit a claim electronically and then submit it on paper, it can significantly slow down your payment. If you submit a claim and need to verify payment, please contact our medical and dental claims

administrator or log in to ClaimLink to check the claim status. Resubmit a claim only if it is not already on file. When the same claim is submitted multiple times, each additional claim can deny as a duplicate and further delay the adjudication process.

If you have questions, please do not hesitate to contact our medical and dental claims administrator by calling 1-405-416-1800 or toll free 1-800-782-5218.

*Dental providers: For faster service and to save time and expense, please do not send dental x-rays or molds with your claims or dental pre-determinations unless they are requested by HealthChoice.

Important Plan and Benefit Changes for 2015

Visit our website at
www.healthchoiceok.com
for important plan and benefit
changes for 2015.

HealthChoice Provider NETWORK NEWS

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Network Provider Contact Information

HealthChoice Providers

www.sib.ok.gov

www.healthchoicook.com

Medical and Dental Claims

HP Administrative Services, LLC

P.O. Box 24870

Oklahoma City, OK 73124-0870

Customer Service and Claims

OKC Area 1-405-416-1800

Toll-free 1-800-782-5218

FAX 1-405-416-1790

TDD 1-405-416-1525

Toll-free TDD 1-800-941-2160

Pharmacy

Express Scripts

Pharmacy Prior Authorization for
Preferred/Non-Preferred or
Brand/Generic

Toll-free 1-800-841-5409

Other Pharmacy Prior Authorization

Toll-free 1-800-753-2851

Certification

APS Healthcare

P.O. Box 700005

Oklahoma City, OK 73107-0005

Toll-free 1-800-848-8121

Toll-free TDD 1-877-267-6367

FAX 1-405-416-1755

HealthChoice Health Care
Management Unit

OKC Area 1-405-717-8879

Toll-free 1-800-543-6044,
ext. 8879

HealthChoice Network Management

OKC Area 1-405-717-8790

Toll-free 1-800-543-6044

DOC Network Management

<https://gateway.sib.ok.gov/DOC>

OKC Area 1-405-717-8750

Toll-free 1-866-573-8462

DOC Medical and Dental Claims

HP Administrative Services, LLC

P.O. Box 268928

Oklahoma City, OK 73126-8928

Toll-free 1-800-262-7683

DRS Network Management

<https://gateway.sib.ok.gov/DRS>

OKC Area 1-405-717-8921

Toll-free 1-888-835-6919

DRS Medical and Dental Claims

HP Administrative Services, LLC

P.O. Box 25069

Oklahoma City, OK 73125-0069

Toll-free 1-800-944-7938