

Breast Pumps Now a Purchase DME Item



Effective August 1, 2012, breast pumps became available as a purchase DME item to breast feeding women for our Commercial and Insurance Company members post delivery. To qualify, the member must have a valid prescription for the item, have current eligibility as a PHP member and obtain the pump through PHP's preferred vendor, Sparrow Medical Supply (SMS). Benefits differ for some PHP policies, but for most this would be a covered benefit with no member cost share. PHP members can contact Customer Service to verify their benefits. Commercial members can call 517.364.8500 or 1.800.832.9186 and PHP Insurance Company members can call 517.364.8456 or 1.800.203.9519.

Sparrow Medical Supply has many locations to service PHP members. SMS can make arrangements for delivery of this equipment when necessary. Locations for Sparrow Medical Supply are:

915 E Michigan Ave, Lansing	517.364.2115 or 877-205-3500
1022 Michigan Ave, Alma	989.463.2384 or 800.858.7418
3192 S Commerce Lane, Suite C-4 Ionia	616.522.0515
508 S Clinton, Grand Ledge	517.627.9345
922 S Mission St, Mt. Pleasant	989.772.7244 or 877.253.2244
306 Elm St, St. Johns	989.224.6730
129 S Putnam Williamston	517.655.1015

If you have any questions, please contact your Provider Relations Coordinator at 517.364.8312.

Vaccines



PHP members that have a Pharmacy benefit with PHP can go to an In-Network Pharmacy to have the Injectable Flu Vaccine, Pneumonia Vaccine or the Shingles Vaccine* administered at no charge. The Pharmacy must be able to administer the medication on-site. Pharmacies will be reimbursed for the vaccine and the administration fee.

*Shingles Vaccine is only covered for members that are 50 years of age and older



Provider Satisfaction Survey

You may have recently been asked to participate in PHP's provider satisfaction survey. If you have, you can complete your survey using the form sent to you, electronically using the ID and password sent with the request, or by phone, if the survey group calls you. Your feedback is important to us, please complete your survey so we can improve our service to you!

Enclosures

- Notification/ Authorization Table
- Pharmacy Clinical Criteria

Upcoming Holiday Hours

Physicians Health Plan will be closed in observation of the upcoming holidays on the following days:

November 22, 2012
November 23, 2012
December 24, 2012
December 25, 2012
January 1, 2013

If you have an issue that requires immediate assistance, our answering service will be available to assist you.

Please contact your Provider Relations Coordinator if you have any questions about any items or articles in this publication.

We welcome your comments and article ideas for future publications.

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Provider Connection

Fall 2012

Announcing A New Brand Identity!

For over 30 years Physicians Health Plan (PHP) has built a reputation for strong values and exceptional service. What is important to us are relationships – between the community and healthcare, doctors and patients, quality and service.

You'll notice from the new look and name of our newsletter, that PHP has changed its brand identity. Our new logo reflects the importance of those relationships and represents the shared values and mission with Sparrow to improve the health of the people in our communities by providing quality, compassionate care to everyone, every time. Working more closely with Sparrow Health System will allow for better disease management and enhanced access to critical healthcare information.

This change in brand identity will not affect PHP plan coverage or services. Some PHP members have received new ID cards and others will start receiving ID cards with the new logo when their groups make renewal decisions with PHP. To be conscious of our resources, the new identity will be phased in over the next six months as current materials are replaced.

If you have any questions, please call your Provider Relations Coordinator at 517.364.8312.

PHP Triple Aim Incentive Program receives Pinnacle Award!

PHP has received special recognition for its work to improve services and care, specifically for Michigan's Medicaid population. The Pinnacle Award for Best Operational Performance, presented by the Michigan Association of Health Plans, is for PHP's Triple Aim Incentive Program (TAIP). Through TAIP, PHP works with primary care providers to improve disease prevention and management, enhance the Patient care experience, and track efficiency. "Receiving this award reaffirms our belief in innovation. We are committed to providing primary care Physicians with resources where they're needed," said Scott Wilkerson, President & CEO, Physicians Health Plan. "We intend to use this as a springboard to develop more programs, broadening our collaborative work with Physicians and their Patients, to transform healthcare here in Michigan." PHP Board Chair MaryLee Davis, Ph.D., noted: "Our commitment to quality services, reflected in programs such as this, directly leads to improved health for people in our communities." The awards were judged by a panel of health care experts, lawmakers, and news media and presented at a recent reception hosted by the Michigan Association of Health Plans (MAHP). MAHP serves as an industry voice for health care plans covering more than 2.4 million Michigan residents.

If you have any questions about the PHP TAIP, please contact your Provider Relations Coordinator at 517.364.8312.

Triple Aim Incentive Reports Sent

PHP recently sent the 2012 status reports for the PHP Commercial, Medicaid and the SPHN Triple Aim Incentive Programs. These reports are a valuable resource in identifying the patients that qualify for the TAIP measures, ensuring the patients have had the care and determining whether it has been billed to PHP. These reports are a critical component in receiving a successful outcome in this incentive program. PHP strongly encourages providers to review the status reports to ensure you are receiving credit for the quality care that is being provided.

If you have any questions about the TAIP or are interested in an education session with your Provider Relations Coordinator please contact them at 517.364.8312.



Children's Special Health Care Services enrollees in PHP

Effective October 1, 2012, children who are enrolled in the Medicaid Children's Special Health Care Services (CSHCS) Program, have the option of selecting or being assigned to PHP FamilyCare for coverage of services. PHP FamilyCare is required to have a network of available providers to appropriately serve any PHP FamilyCare CSHCS enrollees. If you are currently seeing any CSHCS enrollees and would like to continue to see them under PHP FamilyCare coverage, please make sure you have returned the CSHCS PCP Attestation Form sent out in August 2012. If you need a CSHCS PCP Attestation Form or have any questions, please contact your Provider Relations Coordinator at 517.364.8312.

To report any suspected fraud or abuse by either a PHP member or provider, please call 517.267.9990 and press 1 to reach PHP's Compliance Department.

Are you getting TAIP credit for BMI?

To receive credit for the BMI TAIP measure, providers should be submitting a claim reflecting the appropriate HCPCS code(s) in combination with ICD diagnosis code representing the BMI results. Appropriate documentation should be maintained in the patient record supporting the service provided. Please refer to your 2012 TAIP plan description for qualifying BMI coding details.

TAIP Education Sessions Offered

Do you have questions about what the TAIP is? Do you want to know more about how to qualify for the TAIP? Or why you are not receiving credit on your TAIP reports for patients you are seeing? It may be because your membership rosters are not up-to-date, reflecting every PHP, PHP FamilyCare, or SPHN member you are actually providing care. Accurate and complete membership rosters are a critical tool to ensure eligibility in TAIP. They are also a valuable component to ensuring you are receiving the maximum credit for the high quality care you are providing your patients.

PHP wants our Primary Care Physicians to be successful in the TAIPs and is available to provide one on one or group training sessions on our incentive program. We can work with you and your office to provide you with tips for making the TAIP reports work in your practice. Please contact your Provider Relations Coordinator to set up a time to come to your office to discuss TAIP and answer any questions you have. Contact 517.364.8312 today!

Notification Table Update

The Notification/Authorization Table has been updated and is enclosed for your reference. Changes include:

- Addition of various drugs/medications
- Addition of services for the diagnosis and treatment of Autism

Prescription Drug List for all products are available in electronic format only. All Prescription Drug Lists can be accessed at www.phpmm.org by clicking on *For Providers* and then selecting *Pharmacy* from the menu. Hardcopy lists are available upon request. Please contact Customer Service at 1.800.832.9186.

PHP After Hours Access

PHP recently conducted our annual survey of all primary care physician/practitioner (PCP) offices to determine compliance with our after hours access standards. PCPs are required contractually to provide or arrange for the provision of advice and assistance to PHP members in emergency situations twenty-four hours a day, seven days a week. PHP's 24-hour access standard, which can be found on the PHP website, states:

24 Hour Access to Medical Care:

- *Participating Licensed Independent Practitioners (LIP) shall have appropriate methods for directing members to seek medical care when the LIP is not available. The LIP shall provide or arrange for the provision of advice and assistance to members in emergency situations 24 hours per day, 7 days per week.*
- *The LIP office shall provide information/communication to members about how they may seek medical care when the LIP is not available (e.g., during normal business hours--vacation/lunch--or after hours).*
- *The Primary Care Practitioners (PCP) shall arrange for access to medical care through:*
 - *one phone number which is answered during office hours by LIP staff and at other times automatically transfers to another location to be answered,*
 - *an answering service, or*
 - *a recording directing members how to reach the PCP or another medical LIP whom the PCP has designated to treat PHP members.*

If a primary care physician/practitioner office has been identified as not having appropriate coverage in place, a letter will be directed to the office with a designated timeframe to become compliant. If the office remains non-compliant with this standard, a phone call will be made to the office to discuss what corrections need to be made and provided a designated timeframe to become compliant. If the provider remains non-compliant, the matter will be forwarded to the appropriate committee for further actions or sanctions.

If you have any questions regarding the after hours access standards please contact your Provider Relations Coordinator at 517.364.8312.

We Want Your Feedback!



Communication is always a challenge in a network as large and diverse as ours and so we must use a variety of mechanisms to ensure meaningful and adequate information is provided to all. It is our hope that the PHP Provider Connection Newsletter will be a key tool to provide information, updates, challenges and successes at PHP and your practices.

In order for our newsletter to be most effective, it is important that we hear from you. We want to know what you would like to read about in our newsletter and what is important to you! We encourage you to submit your ideas for articles to your Provider Relations Coordinator. You can submit any article ideas or suggestions to:

Phone: 517.364.8312
Fax: 517.364.8412
Email: Heather.Richardson@phpmm.org
Trisha.Kopulos@phpmm.org

Thank you for your continued support and assistance in making our newsletter a valuable tool for you and your practice!







PHP NOTIFICATION/PRIOR AUTHORIZATION TABLE-ALL PRODUCTS EFFECTIVE OCTOBER 31, 2012

PHP Notification/Prior Authorization Table-All Products Effective October 31, 2012.												
SERVICES / ITEMS / PROCEDURES	Commercial & Federal Employee (FEHB)		Medicaid		Self Funded (L0000264; DAS00100, 200, 300)		SPHN (MNA, IUE, UAW & SEIU. DAS00600, 900, 1000, 1200)		SPHN (Non-Union, DAS01100)		PPO	
	Within 1 business day	Prior to Service	Within 1 business day	Prior to Service	Within 1 business day	Prior to Service	Within 1 business day	Prior to Service	Within 1 business day	Prior to Service	Within 1 business day	Prior to Service
Abortion services	**** N/A	**** N/A		√	**** N/A	**** N/A	**** N/A	**** N/A	**** N/A	**** N/A	**** N/A	**** N/A
Acute admissions that are urgent or emergent (including direct admissions) except maternity services for delivery (see below for exception)	√		√		√		√		√		√	
Acute maternity admissions that exceed federal mandated LOS (48 hours after delivery for vaginal delivery & 96 hours after cesarean section delivery)	√		√		√		√		√		√	
Acute pre-operative days admission		√		√		√		*** √		*** √		√
Acute psychiatric/substance abuse admissions that are urgent or emergent (facility notification)	**** Contact UBH	**** Contact UBH	**** Contact CMH	**** Contact CMH	**** N/A	**** N/A	√		√		√	
Acute rehabilitation admission		√		√		√		*** √		*** √		√
Acute scheduled admissions	√		√		√			*** √		*** √		√
Acute scheduled psychiatric or substance abuse admissions (facility notification)	**** Contact UBH	**** Contact UBH	**** Contact CMH	**** Contact CMH	**** N/A	**** N/A		√		√		√
Autism & Autism Spectrum Disorder	**** Contact UBH	**** Contact UBH	**** Contact CMH	**** Contact CMH	N/A	N/A	N/A	N/A	N/A	N/A		√
Bariatric surgery		** √		** √		** √		** √		** √		Δ √
Behavioral Health Services- certain outpatient services	**** Contact UBH	**** Contact UBH		√	**** N/A	**** N/A		√		√		√
Behavioral Health Services- day treatment	**** Contact UBH	**** Contact UBH	**** Contact CMH	**** Contact CMH	**** N/A	**** N/A		√		√		√
Dental anesthesia: pediatric/adult		√		√		√	**** N/A	**** N/A	**** N/A	**** N/A		√
Dental services-accidental		√		√		√	**** N/A	**** N/A	**** N/A	**** N/A		√
Durable medical equipment: ALL repair/replacement		√		√		√		√		√	**** N/A	**** N/A
Durable medical equipment: over \$500-purchase price or cumulative rental		√		√		√		√		√	**** N/A	**** N/A
Endoscopy and intestinal imaging (capsule only)		√		√		√	**** N/A	**** N/A		√	**** N/A	**** N/A

PHP NOTIFICATION/PRIOR AUTHORIZATION TABLE-ALL PRODUCTS EFFECTIVE OCTOBER 31, 2012

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	Within 1 business day	Prior to Service	Within 1 business day	Prior to Service	Within 1 business day	Prior to Service	Within 1 business day	Prior to Service	Within 1 business day	Prior to Service	Within 1 business day	Prior to Service
Facet Injections: diagnostic injections up to 3/cal year per level per side-notification only; diagnostic injections > 3 per calendar year & all neurolysis procedures-prior authorization required.		√		√		√	**** N/A	**** N/A	**** N/A	**** N/A		√
Gamma knife thalamotomy		√		√		√		√		√	**** N/A	**** N/A
Genetic testing		√		√		√		√		√		√
Home care visits for therapy		√		√		√		√		√	**** N/A	**** N/A
Hospice services		√		√		√	**** N/A	√ Non-network	**** N/A	√ Non-network	**** N/A	**** N/A
Hyperbaric oxygen therapy		√		√		√		√		√	**** N/A	**** N/A
Infertility treatment	**** N/A	**** N/A	**** N/A	**** N/A	**** N/A	**** N/A		√		√	**** N/A	**** N/A
Long term acute care admission		√		√		√		*** √		*** √		√
Neuropsychiatric testing		√ Call UBH		√		√	**** N/A	**** N/A		√		√
Non-urgent ambulance requests		√		√		√		√		√	**** N/A	**** N/A
Outpatient home infusion services		√		√		√		√ Non-network		√ Non-network	**** N/A	**** N/A
Photodynamic Therapy & Special Dermatologic Procedures		√		√		√		√		√		√
Procedures that under some conditions may be considered cosmetic: Abdominoplasty, Breast Reduction, Procedures for Gynecomastia, Breast Reconstruction, Jaw Surgeries, Sclerotherapy, Vein Surgery, including stripping and ligation, Eyelid Repair (blepharoplasty, brow ptosis, blepharoptosis), Rhinoplasty, Keloid Scar Revision.		√		√		√		√		√		√
Surgical Treatment of Femoroacetabular Impingement (FAI)- Codes: 29914, 29915.		√		√		√		√		√		√
Prosthetic devices over \$1000		√		√		√		√		√	**** N/A	**** N/A
Psychodiagnostic testing		√ Call UBH		√		√		√		√		√
Referral to or services by any non-network provider including scheduled surgery		√		√		√		√ (Non-SPHN provider)		√ (Non-SPHN provider)	**** N/A	**** N/A
Skilled nursing facility, subacute nursing & rehabilitation services		√		√		√		√		√		√
Skilled nursing home care visits		√		√		√		√		√	**** N/A	**** N/A
Speech therapy (outpatient visits)		√		√	**** N/A	**** N/A		√		√	N/A	N/A


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	Within 1 business day	Prior to Service	Within 1 business day	Prior to Service	Within 1 business day	Prior to Service	Within 1 business day	Prior to Service	Within 1 business day	Prior to Service	Within 1 business day	Prior to Service
Spinal cord stimulation & sacral nerve stimulation		√		√		√		√		√	**** N/A	**** N/A
Transplant services including screening and evaluation		√		√		√		√		√		√
Unproven/investigational services including emerging technology/category III codes		√		√		√		√		√		√
Uvulopalatopharyngoplasty (UPPP)		√		√		√	**** N/A	**** N/A	**** N/A	**** N/A	**** N/A	**** N/A
Weight management services including evaluation, management, surgery & post-surgical procedures		√		√		√		√		√		Δ √
90378 # palivizumab (Synagis)		√		√		√		√		√		√
C9286 # belatacept (Nulojix)		√		√		√		√		√		√
C9292 # pertuzumab (Perjeta)		√		√		√		√		√		√
C9293 # glucarpidase (Voraxaze)		√		√		√		√		√		√
J0129 # abatacept (Orencia)		√		√		√		√		√		√
J0135 # adalimumab (Humira) 		√		√		√		√		√		√
J0180 # agalsidease beta (Fabrazyme)		√				√		√		√		√
J0205 # alglucerase (Ceredase)		√				√		√		√		√
J0220 # alglucosidase alfa (Myozyme)		√		√		√		√		√		√
J0221 # alpha alglucosidase alfa (Lumizyme)		√		√		√		√		√		√
J0256 # alpha 1 - proteinase inhibitor - human, (Aralast, Aralast NP, Prolastin, Prolastin-C, Zemaira)		√		√		√		√		√		√
J0257 #alpha 1 Antitrypsin-AAT (Glassia)		√		√		√		√		√		√
J0490 # belimumab (Benlysta)		√		√		√		√		√		√
J0585- J0587 # Botox injections		√		√		√	**** N/A	**** N/A		√		√
J0597 # c1 esterase inhibitor (Berinert)		√				√		√		√		√
J0598 # c1 esterase inhibitor (Cinryze)		√				√		√		√		√
J0638 # canakimab (Ilaris)		√		√		√	**** N/A	**** N/A	**** N/A	**** N/A		√
J0712 # ceftaroline fosamil (Teflaro)		√		√		√		√		√		√
J0718 # certolizumab pegol (Cimzia)		√		√		√		√		√		√
J0775 # collagenase, clostridium histolyticum (Xiaflex)		√		√		√		√		√		√
J0800 # corticotropin (Acthar)		√				√		√		√		√
J0881- J0882 # darbepoetin alfa (Aranesp)		√		√		√	**** N/A	**** N/A	**** N/A	**** N/A		√
J0885- J0886 # epoetin alfa (Epogen, Procrit)		√		√		√	**** N/A	**** N/A	**** N/A	**** N/A		√
J0897 # denosumab (Prolia)		√		√		√		√		√		√

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	Within 1 business day	Prior to Service	Within 1 business day	Prior to Service	Within 1 business day	Prior to Service	Within 1 business day	Prior to Service	Within 1 business day	Prior to Service	Within 1 business day	Prior to Service
J1290 # ecallantide (Kalbitor)		√		▲		√		√		√		√
J1300 # eculizumab (Soliris)		√		▲		√		√		√		√
J1325 # epoprostenol (Flolan)		√		√		√		√		√		√
J1438 # etanercept (Enbrel) +		√		√		√		√		√		√
J1440- J1441 # filgrastim (G-CSF), (Neupogen)		√		√		√	**** N/A	**** N/A	**** N/A	**** N/A		√
J1458 # galsulfase (Naglazyme)		√		▲		√		√		√		√
J1459 # immune globulin (Privigen)		√		√		√		√		√		√
J1557 # Immune globulin		√		√		√		√		√		√
J1559 # immune Globulin (Hizentra)		√		√		√		√		√		√
J1561 # Immune globulin		√		√		√		√		√		√
J1566 # immune globulin		√		√		√		√		√		√
J1568- J1569 # immune globulin		√		√		√		√		√		√
J1650 # enoxoprin (Lovenox) +		√		√	**** N/A	**** N/A	**** N/A	**** N/A	**** N/A	**** N/A		√
J1675 # histrelin acetate		√		√		√		√		√		√
J1725 # hydroxyprogesterone caproate (Makena)		√		√		√		√		√		√
J1740 # ibandronate sodium (Boniva)		√		√		√		√		√		√
J1743 # idursulfase (Elaprase)		√		√		√		√		√		√
J1745 # infliximab (Remicade)		√		√		√		√		√		√
J1785- J1786 # imiglucerase (Cerezyme)		√		▲		√		√		√		√
J1826 # interferon Beta-1A (Avonex) +		√		√	**** N/A	**** N/A	**** N/A	**** N/A	**** N/A	**** N/A		√
J1830 # Interferon Beta-1B (Betaseron) +		√		√	**** N/A	**** N/A	**** N/A	**** N/A	**** N/A	**** N/A		√
J1931 # laronidase (Aldurazyme)		√		▲		√		√		√		√
J2170 # mecasermin (Increlex)		√		√		√		√		√		√
J2260 # milrinone lactate (Primacor)		√		√		√		√		√		√
J2323 # natalizumab (Tysabri)		√		√		√		√		√		√
J2353- J2354 # octreotide (Sandostatin)		√		√		√		√		√		√
J2357 # omalizumab (Xolair)		√		√		√		√		√		√
J2358 # olanzapine (Zyprexa Relprevv)		√		√		√		√		√		√
J2426 # paliperidone Palmitate ER (Invega)		√		√		√		√		√		√
J2504 # pegademase bovine (Adagen)		√		√		√		√		√		√
J2505 # pegfilgrastim (Neulasta)		√		√	**** N/A	**** N/A	**** N/A	**** N/A	**** N/A	**** N/A		√
J2507 # pegloticase (Krystexxa)		√		√		√		√		√		√
J2562 # plerixafor (Mozobil)		√		√		√		√		√		√
J2724 # protein c concentrate (Ceprotin)		√		√		√		√		√		√

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SERVICES / ITEMS / PROCEDURES		Within 1 business day	Prior to Service	Within 1 business day	Prior to Service	Within 1 business day	Prior to Service	Within 1 business day	Prior to Service	Within 1 business day	Prior to Service	Within 1 business day	Prior to Service
J2778	# ranibizumab (Lucentis) Prior Notification required for all diagnoses other than 362.52, 362.53, 362.62, 362.83		√		√		√		√		√		√
J2791- J2792	# Rho (D) immune globulin		√		√		√		√		√		√
J2793	# riloncept (Arcalyst)		√		▲		√		√		√		√
J2796	# romiplostim (Nplate)		√		√		√		√		√		√
J2940	# somatrem (Protropin)		√		√	**** N/A	**** N/A	**** N/A	**** N/A	**** N/A	**** N/A		√
J2941	# somatropin (all growth hormones)		√		√	**** N/A	**** N/A	**** N/A	**** N/A	**** N/A	**** N/A		√
J3095	# televancin (Vibativ)		√		√		√		√		√		√
J3110	# teriparatide (Forteo) 		√		√		√		√		√		√
J3262	# tocilizumab, (Actemra)		√		√		√	**** N/A	**** N/A	**** N/A	**** N/A		√
J3285	# trestipinil (Remodulin)		√		√		√		√		√		√
J3357	# ustekinumab (Stelara)		√		√		√		√		√		√
J3385	# velaglucerase alfa (VPRIV)		√		▲		√		√		√		√
J3487	# zoledronic acid (Zometa)		√		√		√		√		√		√
J3488	# zoledronic acid (Reclast)		√		√		√		√		√		√
J3490	# Unclassified drugs is a list of drugs without a specific HCPCs or CPT code assigned to it- PA is required for all of the following medications (the list is subject to change) : Bevacizumab/Avastin billed with J3490 for the eye: Notification required for all diagnoses other than 362.52, 362.53, 362.62, 362.83), Corifact/Factor XIII, Denosumab/Exgeva, Brentuximab/Adcetris		√		√		√		√		√		√
J3590	# Unclassified biologics		√		√		√		√		√		√
J7180	# Factor products		√		▲		√		√		√		√
J7183- J7187	# Factor products		√		▲		√		√		√		√
J7189- J7199	# Factor products		√		▲		√		√		√		√
J7308	# aminolevulinic acid HCl (Levulan Kerastick)		√		√		√		√		√		√
J7309	# methyl aminolevulinate (MAL), (Metvixia)		√		√		√		√		√		√
J7312	# dexamethasone (Ozurdex)		√		√		√		√		√		√
J7686	# trestipinil		√		√		√		√		√		√
J7699	# NOC drugs, inhalation solution administered through DME		√		√		√		√		√		√


PHP NOTIFICATION/PRIOR AUTHORIZATION TABLE-ALL PRODUCTS EFFECTIVE OCTOBER 31, 2012

SERVICES / ITEMS / PROCEDURES	Commercial & Federal Employee (FEHB)		Medicaid		Self Funded (L0000264; DAS00100, 200, 300)		SPHN (MNA, IUE, UAW & SEIU. DAS00600, 900, 1000, 1200)		SPHN (Non-Union, DAS01100)		PPO	
	Within 1 business day	Prior to Service	Within 1 business day	Prior to Service	Within 1 business day	Prior to Service	Within 1 business day	Prior to Service	Within 1 business day	Prior to Service	Within 1 business day	Prior to Service
J7799 # NOC drugs, other than inhalation drugs, administered through DME		√		√		√		√		√		√
J8498 # antiemetic drug, rectal/suppository, not otherwise specified		√		√		√		√		√		√
J8499 # prescription drug, oral, non chemotherapeutic, NOS		√		√		√		√		√		√
J8561 # everolimus (Afinitor/Zortress) +		√		√		√		√		√		√
J8562 # fludarabine phosphate (Oforta)		√		√		√		√		√		√
J8700 # temozolomide (Temodar)		√		√		√		√		√		√
J9027 # clofarabine (Clolar)		√		√		√		√		√		√
J9043 # Cabazitaxel (Jevtana)		√		√		√		√		√		√
J9155 # degarelix (Firmagon)		√		√		√		√		√		√
J9160 # denileukin diftitox (Ontak)		√		√		√		√		√		√
J9171 # docetaxel (Taxotere)		√		√		√		√		√		√
J9179 # eribulin (Halaven)		√		√		√		√		√		√
J9185 # fludarabine phosphate (Fludara)		√		√		√		√		√		√
J9225 # histrelin implant (Vantas)		√		√		√		√		√		√
J9226 # histrelin implant (Supprelin LA)		√		√		√		√		√		√
J9228 # Ipilimumab (Yervoy)		√		√		√		√		√		√
J9268 # pentostatin (Nipent)		√		√		√		√		√		√
J9302 # ofatumumab (Arzerra)		√		√		√		√		√		√
J9307 # pralatrexate		√		√		√		√		√		√
J9310 # rituximab (Rituxan)		√		√		√		√		√		√
J9315 # romidepsin (Istodax)		√		√		√		√		√		√
J9328 # temozolomide (Temodar)		√		√		√		√		√		√
J9999 # ziv-aflibercept (Zaltrap)		√		√		√		√		√		√
J9351 # topotecan (Hycamtin)		√		√		√		√		√		√
Q0187 # coagulation factor VIIA recomb (Novoseven)		√		▲		√		√		√		√
Q2011 # panhematin (Hemin)		√		▲		√		√		√		√
Q2012 # pegademase bovine (Adagen)		√		▲		√		√		√		√
Q2041 # dendreon (Provenge)		√		√		√		√		√		√
Q2046 # aflibercept (Eylea)		√		√		√		√		√		√
Q2047 # peginesatide (Omontys)		√		√		√		√		√		√
Q2048 # doxorubicin hydrochloride liposomal (Doxil)		√		√		√		√		√		√
Q2049 # doxorubicin hydrochloride liposomal (Lipodox)		√		√		√		√		√		√
Q3026 # Interferon Beta-1A (Rebif) +						**** N/A	**** N/A	**** N/A	**** N/A	**** N/A	**** N/A	
Q4081 # epoetin alfa (Epogen, Procrit)		√		√		√		√		√		√

PHP NOTIFICATION/PRIOR AUTHORIZATION TABLE-ALL PRODUCTS EFFECTIVE OCTOBER 31, 2012

SERVICES / ITEMS / PROCEDURES	Commercial & Federal Employee (FEHB)		Medicaid		Self Funded (L0000264; DAS00100, 200, 300)		SPHN (MNA, IUE, UAW & SEIU. DAS00600, 900, 1000, 1200)		SPHN (Non-Union, DAS01100)		PPO	
	Within 1 business day	Prior to Service	Within 1 business day	Prior to Service	Within 1 business day	Prior to Service	Within 1 business day	Prior to Service	Within 1 business day	Prior to Service	Within 1 business day	Prior to Service
# Adjuvants to Anticonvulsants: Vimpat, Protiga +		√		√		√		√		√		√
# Oral MS Medications: (Ampyra, Gilenya) +		√		√	**** N/A	**** N/A		√		√		√
# Ampyra (delfampridine)		√		√	**** N/A	**** N/A	**** N/A	**** N/A	**** N/A	**** N/A		√
# CNS Stimulants (Provigil, Nuvigil) +		√		√	**** N/A	**** N/A		√		√		√
# Compounded drugs: any		√		√	**** N/A	**** N/A		√		√		√
# CI Inhibitor Replacement Products: Berinert, Cinryze, Kalbitor (medical); Firazyf (pharmacy) +		√		√		√		√		√		√
# Direct Acting Antivirals: Incivek, Victrelis +		√		√	**** N/A	**** N/A		√		√		√
+ # GLP-1 Inhibitors: Byetta, Victoza, Bydureon		Byetta Covered No PA needed		√	**** N/A	**** N/A		√		√		Byetta Covered No PA needed
# Growth Hormones: Genotropin, Humatropin, Norditropin, Nutropin, Serostim		√		√	**** N/A	**** N/A	**** N/A	**** N/A	**** N/A	**** N/A		√
# Ocular Anti-VEGF Agents- # aflibercept/Eylea, ranibizumab/Lucentis & bevacizumab/Avastin Prior Notification required for all diagnoses other than 362.52, 362.53, 362.62, 362.83		√		√		√		√		√		√
# Orphan Drugs		√		√		√		√		√		√
# Osteoporosis Agents Boniva, Fosamax, Actonel, Forteo, Reclast, Prolia, Atelvia		√		√		√		√		√		√
# Pulmonary Arterial Hypertension (PAH): Adcirca, Letairis, Revatio, Tracleer, Ventavis, Flolan, Remodulin		√		√		√		√		√		√
# Samsca +		√		√	**** N/A	**** N/A		√		√		√
# Tumor Necrosis Factor (TNF) blocking agents: Cimzia, Enbrel, Humira, Remicade, Actemra, Simponi, Stelara, Orenica (IV and Pharmacy)		√		√		√		√		√		√
# Tobacco cessation products: (Chantix, Nicotine Gum, Nicotine Patch, Zyban are covered for three months per calendar year without prior authorization). (Nicotrol Inhaler, Nicotrol Spray, Nicotine Lozenge always needs a prior authorization prior to service). +		√		√	**** N/A	**** N/A		√		√	Contract Exclusion for Grandfathered groups	Contract Exclusion for Grandfathered groups

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SERVICES / ITEMS / PROCEDURES	Commercial & Federal Employee (FEHB)		Medicaid		Self Funded (L0000264; DAS00100, 200, 300)		SPHN (MNA, IUE, UAW & SEIU. DAS00600, 900, 1000, 1200)		SPHN (Non-Union, DAS01100)		PPO	
	Within 1 business day	Prior to Service	Within 1 business day	Prior to Service	Within 1 business day	Prior to Service	Within 1 business day	Prior to Service	Within 1 business day	Prior to Service	Within 1 business day	Prior to Service
# Weight loss medications: Adipex, Meridia 		√	Contract Exclusion per State Mandate	Contract Exclusion per State Mandate	**** N/A	**** N/A	Contract Exclusion	Contract Exclusion	Contract Exclusion	Contract Exclusion	Contract Exclusion for Grand-fathered groups	Contract Exclusion for Grand-fathered groups
Not otherwise classified, unspecified, unlisted, miscellaneous CPT or HCPCS services- services will be reviewed prior to claim payment and may be denied as cosmetic, investigational, experimental, unproven, or not medically necessary services.												
* Non-emergent/urgent requests for benefit review are to be submitted >14 days in advance of the service or as soon as the service is determined to be appropriate by the practitioner. Urgent requests are requests for care or treatment for which a routine application of time periods for making the determination could seriously jeopardize the life or health of the member or the member's ability to regain maximum function or in the opinion of a practitioner would subject the member to severe pain that cannot be adequately managed without the care or treatment that is included in the request.												
** Bariatric surgery candidates must participate in the case management program with PHP's approved designee for a case management evaluation and interventions.												
*** Notification must occur at least five (5) business days before surgery is scheduled to occur.												
**** N/A - prior authorization is not required but the service may have a limited benefit or not be a covered benefit. For mental health/substance use disorder services for commercial products contact United Behavioral Health @ 800.608.2667. For inpatient mental health/substance use disorder services for Medicaid members contact Community Mental Health.												
# Medications that are reviewed and processed by the Pharmacy Department.												
Services requiring prior authorization must be reviewed in advance of the service even if PHP is a secondary payor.												
△ Weight management and surgical treatment of obesity is covered for PPO products ONLY with a rider and, if rider is purchased, prior authorization is required.												
+ Covered as a pharmacy benefit only with quantity limits												
▲ All Home Care Providers must bill Medicaid/FamilyCare claims to MDCH as of 10/1/12. All other Providers must submit an authorization form to PHP for review. If the request is approved claims are billed to PHP. The PHP billing information is on the back of the member's card.												

PHP Pharmacy Department Clinical Criteria

The following pharmacy benefit determination (PBD) policies were recently revised. If you would like a copy of any policies that are listed please contact the Pharmacy Department at 1.877.205.2300 or you can send an email via the following secure email link: <https://www.forsberg.com/phpsecure/phpminquiry.asp>

Pharmacy Benefit Determination (PBD) Policy Name	Policy Status
Anti-VEGF (PBD35)	New 8/23/12-Next Review 8/13
Benlysta (PBD31)	New 12/11 Next Review 12/12
Bone Modifying Agents (PBD36)	New 8/23/12-Next Review 8/13
Botulinum Toxin-Botox (PBD32)	New 8/23/12-Next Review 8/13
C1 Inhibitor Replacement Products (PBD 21)	Approved-Next Review 12/12
CNS Stimulants Pharmacy Policy (PBD06)	Approved-Next Review 7/12
Compounded Drugs Pharmacy Policy (PBD24)	Approved-Next Review 4/13
Direct Acting Antivirals (PBD30)	New 12/11 Next Review 12/12
Erythroid Stimulating Agents (ESA) (PBD20)	Approved-Next Review 8/12
G-CSF Pharmacy Policy (PBD13)	Approved-Next Review 12/12
GLP-1 Receptor Antagonist (PBD 15)	Approved-Next Review 3/13
Growth Hormone Pharmacy Policy (PBD28)	Approved-Next Review 8/12
IGIV/IGSQ Pharmacy Policy (PBD12)	Approved-Next Review 6/12
Ilaris Pharmacy Policy (PBD22)	Approved-Next Review 3/13
Oral MS Drugs (PBD29)	Approved-Next Review 8/12
Orencia Pharmacy Policy (PBD27)	Approved-Next Review 7/12
Osteoporosis Agents Pharmacy Policy (PBD17)	Approved-Next Review 7/12
Pulmonary Arterial Hypertension (PAH) (PBD26)	Approved-Next Review 6/12
Rituximab Pharmacy Policy (PBD14)	Approved-Next Review 12/12
Samsca Pharmacy Policy (PBD23)	Approved-Next Review 3/13
Synagis Pharmacy Policy (PBD04)	Approved-Next Review 10/12
TNF Agents Pharmacy Policy and Table (PBD16)	Approved-Next Review 7/12
Tobacco Cessation Pharmacy Policy (PBD19)	Approved-Next Review 11/12
Tysabri Pharmacy Policy (PBD10)	Approved-Next Review 6/12
Vimpa.Potiga (PBD34)	New 8/23/12-Next Review 8/13
Weight Loss Medications Pharmacy Policy (PBD25)	Approved-Next Review 4/13
Xolair Pharmacy Policy (PBD02)	Approved-Next Review 5/13