NEWBORN COMPLIANCE REMINDER

Industry standard billing includes the requirement to report birth weights, type of admission codes, and condition codes related to cesarean sections or inductions related to gestational age.

Providers are required to report the appropriate type of admission or visit in accordance with National Uniform Billing Committee guidelines (NUBC). For example: A newborn admission should be reported as a type of admission "4" (newborn" and the special point of origin code "5" (born inside this hospital) or "6" (born outside this hospital).

Providers are required to report Newborn Birth Weight:
NUBC value code **"54" (newborn birth weight in grams)** is required on all claims with the type of admission "4". **Birth weight should be reported as a whole number.** For example, if the birth weight is 2764.5 grams, then the value code "54" amount should be reported as "2765."

Providers are expected to report the following NUBC condition codes for cesarean sections or inductions related to gestational age, as appropriate:

- C-sections or inductions at less than 39 weeks gestation for medical necessity.
  Condition Code "81":
- C-sections or inductions at less than 39 weeks gestation electively.
  Condition Code "82":
- C-sections or inductions at 39 weeks gestation or greater.
  Condition Code "83":

<u>**Claims submitted without the industry standard billing requirements for newborns, such as newborn priority (type of) admission or visit, birthweight, and condition codes may be rejected if not present or incorrect**</u>.

PHP has conducted a post payment audit on claims with dates of admission on or after 1/1/2015 for the above condition codes, birth weights and type of admissions. The results show that most claims failed to report the conditional codes and many claims had birth weights inaccurately reported.   To ensure appropriate processing of your claims and eliminate the   possibility   of rejections, remember to report **condition codes on all** cesarean sections or inductions related to gestational age and the **birth weights in whole numbers.**

For more information on accurate coding of newborn claims, please refer to the Michigan Department of Community Health (MDCH) Bulletin Number MSA 14-34, MSA 14-59 and the National Uniform Billing Committee Guidelines or Uniform Billing Editor.

Enclosures

- Notification/Authorization Table <u>effective 8/1/2015</u>

- <u>HealthWeb Flyer</u>

Please contact a Provider Relations Coordinator if you have any questions about the details or articles in this publication.

We welcome your comments and article ideas for future publications.

This Update is Produced By:

**PHP, Network Services Department
PO Box 30377, Lansing, MI 48909-7877**

Visit our website at: www.phpmichigan.com

517.364.8312   800.562.6197

Focus Group Update

Physicians Health Plan (PHP) recently conducted a focus group with our provider network. The content for these sessions included questions centered on the PHP Triple-Aim Incentive Program (TAIP).

Among items discussed were the preferred method for receiving TAIP documents, processes for meeting program measures, and how the TAIP relates to the daily work your office performs. Feedback that we received from participants included suggestions on improving the format of TAIP reports, requests to provide clearly identifiable areas for performance improvement, and recommendations for modifying measures for future program years. In addition, participants also spoke about some of the barriers that providers encounter while trying to meet performance measures.

PHP values the information that we gather during these sessions as it helps us understand how we can best serve you. We are currently in the process of reviewing all feedback received from our focus groups and making recommended changes to improve the TAIP reporting, as well as meeting to prepare the 2016 TAIP. We sincerely thank all of those who contributed their thoughts and ideas during these sessions.

If you are interested in participating in a future focus group, please contact a PHP Provider Relations Coordinator at 517.364.8312.

ICD 10 Countdown

With only a few weeks left until the industry-wide switch to the ICD-10 coding system effective October 1, 2015; PHP would like to remind you of the following:

- All claims submitted with dates of service 10/1/2015 and after must include ICD-10 coding.
- PHP will not translate ICD-9 codes to ICD-10 codes at any time.
- Claims cannot contain both ICD-9 and ICD-10 codes.
- <u>Any claims submitted after the 10/1/2015 effective date that do not include the ICD-10 code sets will be rejected.</u>

For additional resources and training on ICD-10, please visit the following links:
www.cms.gov/icd10
http://www.michigan.gov/5010ICD10

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

PHP now offering Medication Therapy Management Services

What is Medication Therapy Management?

Patients who are chronically ill or have many health conditions can sometimes be overwhelmed by the number of medications needed to manage their care. Our complimentary Medication Therapy Management program can help.

Medication Therapy Management (MTM) is an innovative pharmacist-directed program to help patients understand and manage their medication regimen and to assist prescribers in avoiding potential medication-related problems. MTM services are available **to ALL Patients covered by PHP**. This program is especially helpful for patients transitioning home after leaving the hospital and can help to meet the needs of patients and improve health outcomes

As part of our mission to improve the health of the people in our communities, we ask that you share this program information with patients who are covered under Physicians Health Plan (PHP).

Patients will meet with a PHP clinical pharmacist on a continuous or as-needed basis. During the appointment, the pharmacist will:

- Review all prescriptions, including over-the-counter and herbal medications.
- Evaluate effectiveness, side effects, therapy duplications, drug interactions, and under/over dosing.
- Identify cost-saving measures when appropriate.
- Address any questions or concerns about medications and health conditions.
- Discuss preventative health measures and health literacy.
- Provide a printed summary of the appointment and medication list.

How will patients benefit from participating?

- Better prevention and management of side effects and drug interactions.
- Private, personal communication with a clinical pharmacist to help patients' better understand their drug therapy.
- Improved health outcomes and fewer hospital readmissions.

How do I sign up my Patients?

Call PHP's Pharmacy Department directly at 517.364.8376 to set up an appointment with the clinical pharmacist for MTM services. In-person appointments will be held in the Medical Arts Building.

There is no co-pay for MTM services and patients will not receive a bill. MTM services are 100% funded by PHP to help improve members overall health and wellness.

Prior Authorization Change for Continuous Glucose Monitoring (CGM) Equipment and Supplies

Physicians Health Plan (PHP) recently made a change to our Authorization Notification Table regarding Continuous Glucose Monitors (CGM). Effective August 30, 2015, PHP will require prior authorization for any CGM equipment and supplies.

If you need to submit a request on behalf of a member, you can complete the prior authorization request form available on our website at **www.phpmichigan.com** and fax the completed request to the PHP Medical Resource Management Department at: 517.364.8409.

If you have questions about benefit coverage, co-payments, or claims processing; please call PHP Customer Service at 517.364.8500 or 800.832.9186.

Genetic Testing Prior Authorization Requirements

Genetic testing requires a prior authorization for all PHP and SPHN policies. There are medical criteria for genetic tests and following the prior authorization process allows for the medical review to take place *before* the test occurs. If a prior authorization is not requested for genetic testing, you and/or the member may be liable for the cost of the test. This includes office-collected tests, which can result in member financial liability. Retrospective authorization requests are not granted for these tests.

Genetic testing is included on PHP's Notification and Authorization Table. A copy of the most current table is enclosed and is also available on our website, **www.phpmichigan.com.**

If you have questions about requirements made by the Medical Resource Management (MRM) department, or if you do not understand why a health service was denied or reduced, you can reach the PHP MRM Department Monday through Friday 8:00 am – 5:00 pm at 517.364.8560 or toll free at 1.866.203.0618.

Provider Notices

Please see below for important PHP notifications:

- All provider medical service request forms have been updated on our Physicians Health Plan (PHP) website to include ICD-10 and HIPAA disclosure language.

  Please use the most current form when submitting service requests.

- When making a referral for a patient to be evaluated for a solid organ or bone marrow/peripheral stem cell transplant, please call the PHP Transplant Case Manager at 517.364.8231 to obtain the most current list of PHP designated providers.

  Transplant services require prior authorization beginning with the evaluation visit .

PHP's Prescription Drug List for all products is available in electronic formats. All Prescription Drug Lists can be accessed at www.phpmichigan.com by clicking on *Providers* and then selecting *General Forms and Information*. Hardcopy lists are available upon request by contacting PHP's Customer Service at 1.800.832.9186.

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.

Physicians Health Plan

NOW AVAILABLE!

PHYSICIANS HEALTH PLAN

NETWORK SERVICES
1400 E. MICHIGAN AVE
LANSING, M 48912

Phone: 517.364.8312
Fax: 517.364.8412

As part of our efforts to improve ease of use, providers can now access Explanation of Payment (EOP) notices using HealthWeb®.

This new feature is available through our online portal in an effort to make information and resources readily available to our providers.

Physicians Health Plan

HOME

MEMBER INQUIRY

CLAIM CENTER

SEARCH CLAIMS

SEARCH EOP

MEDICAL MANAGEMENT

PROVIDER SEARCH

TRACK REQUESTS

CHANGE PASSWORD

LOG OFF

Manage Members

- Find a Member
- Submit Outpatient Pre-Auth
- Submit Inpatient Pre-Auth
- Direct Urgent Requests to Care Coordination at (517) 782-8238, and 8560 or (866) 203-0618 for PHP providers

Claims and Services

- View Recent Claims
- View Outpatient Services
- View Inpatient Stays
- UM Predetermination Check
- Search EOP

Provider Look-up

- Find a Provider
- Find a Facility

To read about other features available on the HealthWeb® portal check out the back of this flyer.

If you would like additional information on the services available via HealthWeb®, please contact PHP Network Services at 517.364.8312.

Physicians Health Plan

HealthWeb®

Providers can use the HealthWeb® online tool to:
- Verify member eligibility
- Access the PHP Provider Directory
- Submit medical authorization inquiries and requests
- View and *print* Explanation of Payment (EOP)
- statements
- View claims processing information and check the status of a claim

Members can also access HealthWeb® to:
- Order ID cards
- Verify eligibility
- Update personal information
- Take a Health Risk Assessment
- Change their Primary Care Provider (PCP)
- View and *print* a copy of their Explanation of Benefits (EOB) statements

If you would like to request provider access to the HealthWeb® portal please visit :
- www.phpmichigan.com/Providers
- Click General Forms and Information located at the top left of the screen.
- Complete the My HealthWeb® User Request Form located under the My HealthWeb® heading.
- Please fax your completed request to the number listed at the bottom of the form.
- Providers will be contacted with their logins once assigned.

* Members can register for access through the Self-Service link on the PHP website.

PHYSICIANS HEALTH PLAN NOTIFICATION/PRIOR AUTHORIZATION TABLE-ALL PRODUCTS

PHP Notification/Prior Authorization/Prior Approval Table-All Products Effective August 1, 2015

SERVICES / ITEMS / PROCEDURES	Commercial & Market Place Plans — Within 1 business day	Prior to Service	Lansing Board of Water and Light — Within 1 business day	Prior to Service	Medicaid — Within 1 business day	Prior to Service	MIChild — Within 1 business day	Prior to Service	Self Funded (L0000264; DAS00100, 200, 300) — Within 1 business day	Prior to Service	SPHN (MNA, IUE, UAW & SEIU. DAS00600, 900, 1000, 1200) — Within 1 business day	Prior to Service	SPHN (Non-Union, DAS01100) — Within 1 business day	Prior to Service	PPO — 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	**** 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)	√ *		√		√ *		Refer to CMH		**** N/A	**** N/A	√		√		√	
Acute rehabilitation admission		√		√		√		√		√		*** √		*** √		√
Acute scheduled admissions	√			√	√		√		√			*** √		*** √		√
Acute scheduled psychiatric or substance abuse admissions (facility notification)		√ *		√	√ *		√ *			√		√		√		√
Autism & Autism Spectrum Disorder Treatment		√ *	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A		√
Bariatric surgery		** √		√		** √		** √		** √		** √		** √		Δ √
Behavioral Health Services- certain outpatient services		√ *		√ (ECT)		√	Refer to CMH	Refer to CMH	**** N/A	**** N/A		√		√		√
Behavioral Health Services- day treatment		√		√	N/A	N/A	Refer to CMH	Refer to CMH	**** N/A	**** N/A		√		√		√
Dental anesthesia: pediatric/adult		√	N/A	N/A		√		√		√	**** N/A	**** N/A	**** N/A	**** N/A		√
Dental services-accidental		√		R		√		√		√	**** N/A	**** N/A	**** N/A	**** N/A		√
Durable medical equipment: Implantable devices, e.g. insulin and infusion pumps, bone stimulators; power wheelchairs and/or mobility devices; automatic external defibrillators; chest wall oscillation vest		√	N/A	N/A		√		√		√		√		√	**** N/A	**** N/A
Endoscopy and intestinal imaging (capsule only)		√	N/A	N/A		√		√		√	**** N/A	**** N/A		√	**** N/A	**** N/A
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	**** N/A	**** N/A		√

PHYSICIANS HEALTH PLAN NOTIFICATION/PRIOR AUTHORIZATION TABLE-ALL PRODUCTS

	Commercial & Market Place Plans (Physicians Health Plan)		Lansing Board of Water and Light (Physicians Health Plan)		Medicaid (Sparrow PHP)		MIChild (Sparrow PHP)		Self Funded (L0000264; DAS00100, 200, 300) (Physicians Health Plan)		SPHN (MNA, IUE, UAW & SEIU. DAS00600, 900, 1000, 1200)		SPHN (Non-Union, DAS01100)		PPO (PHP Insurance Company)	
Gamma knife procedures		√	N/A	N/A		√		√		√		√		√	**** N/A	**** N/A
Genetic testing		√		√		√		√		√		√		√		√
Home care visits		√	N/A	N/A		√		√		√		√		√	**** N/A	**** N/A
Hospice services		√	N/A	N/A		√		√		√	**** N/A	√ Non-network	**** N/A	√ Non-network	**** N/A	**** N/A
Hyperbaric oxygen therapy		√	N/A	N/A		√		√		√		√		√	**** N/A	**** N/A
Infertility treatment	**** N/A	**** N/A	N/A	N/A	**** N/A	**** N/A	**** N/A	**** N/A	**** N/A	**** N/A		√		√	**** N/A	**** N/A
Long term acute care admission		√		√		√		√		√	*** √		*** √			√
Neuropsychiatric testing		√ *		R		√	Refer to CMH			√	**** N/A	**** N/A		√		√
Non-urgent ambulance requests		√	N/A	N/A		√		√		√		√		√	**** N/A	**** N/A
Outpatient home infusion services		√	N/A	N/A		√		√		√		√ Non-network		√ Non-network	**** N/A	**** N/A
Outpatient speech therapy		√		√		√		√		√		N/A		N/A		√
Outpatient rehab therapy (PT/OT/Cardiac/ Pulmonary)		√	N/A	N/A		√		√		√		N/A		N/A		√
Procedures that under some conditions may be considered cosmetic: Abdominoplasty, Breast Reduction, Procedures for Gynecomastia, Breast Reconstruction, Gender Reassignment, Jaw Surgeries, Photodynamic Therapy & Special Dermatologic Procedures, Sclerotherapy, Vein Surgery, including stripping and ligation, Eyelid Repair (blepharoplasty, brow ptosis, blepharoptosis), Rhinoplasty, Keloid Scar Revision.		√		R		√		√		√		√		√		√
Surgical Treatment of Femoroacetabular Impingement (FAI)		√		R		√		√		√		√		√		√
Private duty nursing				√												
Prosthetic devices over $1000		√	N/A	N/A		√		√		√		√		√	**** N/A	**** N/A
Psychodiagnostic testing		√ *		R		√		√		√		√		√		√
Referral to or services by any non-network or referral network provider including scheduled surgery		**** N/A	N/A	N/A		√		√		**** N/A		**** N/A		**** N/A		**** N/A
Skilled nursing facility, subacute nursing & rehabilitation services		√		√		√		√		√		√		√		√
Spinal cord stimulation & sacral nerve stimulation		√	N/A	N/A		√		√		√		√		√	**** N/A	**** N/A
Temporomandibular Joint Dysfunction/Syndrome Treatment		√ for Metal Plans	N/A	N/A												
Transplant services including screening and evaluation (If benefit: includes travel and lodging)		√		√		√		√		√		√		√		√

PHYSICIANS HEALTH PLAN NOTIFICATION/PRIOR AUTHORIZATION TABLE-ALL PRODUCTS

code	NAME	Commercial & Market Place Plans		Lansing Board of Water and Light		Medicaid		MIChild		Self Funded (L0000264; DAS00100, 200, 300)		SPHN (MNA, IUE, UAW & SEIU. DAS00600, 900, 1000, 1200)		SPHN (Non-Union, DAS01100)		PPO	
	Unproven/investigational services including emerging technology/category III codes		√		R		√		√		√		√		√		√
	Low-dose computed tomography (CT) for lung cancer screening		√				√		√		√		√		√		
	Uvulopalatopharyngoplasty (UPPP)		√	N/A	N/A		√		√		√	**** N/A	**** N/A	**** N/A	**** N/A	**** N/A	**** N/A
	Vision services (contact lenses)	N/A	N/A	N/A	N/A	N/A	N/A		√	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	Weight management services including evaluation, management, surgery & post-surgical procedures		√	N/A	N/A		√		√		√		√		√		Δ √
code	NAME		√		√		√		√		√		√		√		√
C9023	# testosterone undecanoate, 1 mg (Andriol)		√		√		√		√		√		√		√		√
C9025	# ramucirumab, 5 mg (Cyramza)		√		√		√		√		√		√		√		√
C9026	# vedolizumab, 1 mg (Entyvio)		√		√		√		√		√		√		√		√
C9135	# antihemophilic factor, recombinant Factor IX, Alprolix, per 10 IU		√		√		√		√		√		√		√		√
C9445	# C-1 esterase inhibitor (Reconest)																
C9448	# netupitant (Akynzeo)																
C9449	# blinatumomab (Blincyto)																
C9450	# fluocinolone acetonide (Iluvien)																
C9451	# peramivir (Rabivab)																
C9452	# ceftolozane and taxobactam (Zerbaxa)																
90378	# palivizumab (Synagis)		√		√		√		√		√		√		√		√
J0129	# abatacept (Orencia)		√		√		√		√		√		√		√		√
J0135	# adalimumab (Humira) ✚		√		√		√		√		√		√		√		√
J0178	# aflibercept Eylea		√		√		√		√		√		√		√		√
J0180	# agalsidease beta (Fabrazyme)		√		√		▲		▲		√		√		√		√
J0205	# alglucerase (Ceredase)		√		√		▲		▲		√		√		√		√
J0220	# alglucosidase alfa (Myozyme)		√		√		▲		▲		√		√		√		√
J0221	# alpha alglucosidease alfa (Lumizyme)		√		√		√		√		√		√		√		√
J0256	# alpha 1 - proteinase inhibitor - human, (Aralast, Aralast NP, Prolastin, Prolastin-C, Zemaira)		√		√		√		√		√		√		√		√
J0257	# alpha 1 Antitrypsin-AAT (Glassia)		√		√		√		√		√		√		√		√
J0365	# aprotinin (Trasylol)		√		√		▲		▲		√		√		√		√
J0401	# aripiprazole (Abilify)		√		√		▲		√		√		√		√		√
J0485	# belatacept (Nulojix)		√		√		√		√		√		√		√		√
J0490	# belimumab (Benlysta)		√		√		√		√		√		√		√		√
J0585-J0588	# 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)		√		√		√		√		√		√		√		√

PHYSICIANS HEALTH PLAN NOTIFICATION/PRIOR AUTHORIZATION TABLE-ALL PRODUCTS

Code	Description	Commercial & Market Place Plans (Physicians Health Plan)	Lansing Board of Water and Light (Physicians Health Plan)	Medicaid (Sparrow PHP)	MIChild (Sparrow PHP)	Self Funded (L0000264; DAS00100, 200, 300) (Physicians Health Plan)	SPHN (MNA, IUE, UAW & SEIU. DAS00600, 900, 1000, 1200)	SPHN (Non-Union, DAS01100)	PPO (PHP Insurance Company)
J0716	# centruroides immune f(ab) (Anascorp)	√	√	√	√	√	√	√	√
J0717-J0718	# certolizumab pegol (Cimzia)	√	√	√	√	√	√	√	√
J0775	# collagenase, clostridium histolyticum (Xiaflex)	√	√	√	√	√	√	√	√
J0795	# corticorelin ovine triflutate (Acthrel)	√	√	▲	▲	√	√	√	√
J0800	# corticotropin (Acthar)	√	√	▲	√	√	√	√	√
J0881-J0882	# darbepoetin alfa (Aranesp)	√	√	√	√	√	**** N/A	**** N/A	√
J0885-J0886	# epoetin alfa (Epogen, Procrit)	√	√	√	√	√	**** N/A	**** N/A	√
J0887	# epoetin beta (for ESRD on dialysis)	√	√	√	√	√	√	√	√
J0888	# epoetin beta (for non-ESRD use)	√	√	√	√	√	√	√	√
J0897	# denosumab (Prolia-Exgeva)	√	√	√	√	√	√	√	√
J1290	# ecallantide (Kalbitor)	√	√	▲	▲	√	√	√	√
J1300	# eculizumab (Soliris)	√	√	▲	▲	√	√	√	√
J1322	# elosulfase alfa (Vimizim)	√	√	√	√	√	√	√	√
J1324	# enfuvirtide (Fuzeon)	**** N/A	**** N/A	▲	▲	**** N/A	**** N/A	**** N/A	**** N/A
J1325	# epoprostenol (Flolan)	√	√	√	√	√	√	√	√
J1438	# etanercept (Enbrel) ✚	√	√	√	√	√	√	√	√
J1440-J1442 & J1446	# filgrastim (G-CSF), (Neupogen)	√	√	√	√	√	√	√	√
J1458	# galsulfase (Naglazyme)	√	√	▲	▲	√	√	√	√
J1459	# immune globulin (Privigen)	√	√	√	√	√	√	√	√
J1556-J1557	# Immune globulin	√	√	√	√	√	√	√	√
J1559	# immune Globulin (Hizentra)	√	√	√	√	√	√	√	√
J1561	# Immune globulin	√	√	√	√	√	√	√	√
J1566	# immune globulin	√	√	√	√	√	√	√	√
J1568-J1569	# immune globulin	√	√	√	√	√	√	√	√
J1602	# Golimumab (Simponi) IV	√	√	√	√	√	√	√	√
J1640	# panhematin (Hemin)	√	√	▲	▲	√	√	√	√
J1650	# enoxoprin (Lovenox) ✚	√	√	√	√	**** N/A	**** N/A	**** N/A	√
J1675	# histrelin acetate	√	√	√	√	√	√	√	√
J1725	# hydroxyprogesterone caproate (Makena)	√	√	√	√	√	√	√	√
J1740	# ibandronate sodium (Boniva)	√	√	√	√	√	√	√	√
J1743	# idursulfase (Elaprase)	√	√	▲	√	√	√	√	√
J1744	# icatibant (Firazyr) ✚	√	√	√	√	√	√	√	√
J1745	# infliximab (Remicade)	√	√	√	√	√	√	√	√
J1785-J1786	# imiglucerase (Cerezyme)	√	√	▲	▲	√	√	√	√
J1826	# interferon Beta-1A (Avonex) ✚	√	√	√	√	**** N/A	**** N/A	**** N/A	√

Code	Drug	Commercial & Market Place Plans	Lansing Board of Water and Light	Medicaid	MIChild	Self Funded (L0000264; DAS00100, 200, 300)	SPHN (MNA, IUE, UAW & SEIU. DAS00600, 900, 1000, 1200)	SPHN (Non-Union, DAS01100)	PPO
J1830	# Interferon Beta-1B (Betaseron) ✚	√	√	√	√	**** N/A	**** N/A	**** N/A	
J1931	# laronidase (Aldurazyme)	√	√	▲	▲	√	√	√	√
J1955	# levocarnitine (Carnitor)	**** N/A	**** N/A	▲	▲	**** N/A	**** N/A	**** N/A	**** N/A
J2170	# mecasermin (Increlex)	√	√	√	√	√	√	√	√
J2212	# methylnaltrexone (Relistor)	√	√	√	√	√	√	√	√
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)	√	√	√	√	√ eff 9/1/13	√ eff 9/1/13	√ eff 9/1/13	√
J2507	# pegloticase (Krystexxa)	√	√	√	√	√	√	√	√
J2562	# plerixafor (Mozobil)	√	√	√	√	√	√	√	√
J2724	# protein c concentrate (Ceprotin)	√	√	▲	▲	√	√	√	√
J2778	# ranibizumab (Lucentis) Prior Notification required for all diagnoses other than 362.07, 362.35, 362.36, 362.52, 362.53, 362.62	√	√	√	√	√	√	√	√
J2793	# rilonacept (Arcalyst)	√	√	▲	√	√	√	√	√
J2796	# romiplostim (Nplate)	√	√	√	√	√	√	√	√
J2940	# somatrem (Protropin)	√	√	√	√	**** N/A	**** N/A	**** N/A	√
J2941	# somatropin (all growth hormones)	√	√	√	√	**** N/A	**** N/A	**** N/A	√
J3060	# taliglucerace alfa (Elelyso)	√	√	√	√	√	√	√	√
J3095	# televancin (Vibativ)	√	√	√	√	√	√	√	√
J3110	# teriparatide (Forteo) ✚	√	√	√	√	√	√	√	√
J3262	# tocilizumab, (Actemra)	√	√	√	√	√	**** N/A	**** N/A	√
J3285	# treprostinil (Remodulin)	√	√	√	√	√	√	√	√
J3357	# ustekinumab (Stelara)	√	√	√	√	√	√	√	√
J3385	# velaglucerase alfa (VPRIV)	√	√	▲	√	√	√	√	√
J3485	# zidovudine (Retrovir)	**** N/A	**** N/A	▲	▲	**** N/A	**** N/A	**** N/A	**** N/A
J3489	# zoledronic acid (Zometa/Reclast)	√	√	√	√	√	√	√	√

PHYSICIANS HEALTH PLAN NOTIFICATION/PRIOR AUTHORIZATION TABLE-ALL PRODUCTS

Code	Description	Physicians Health Plan — Commercial & Market Place Plans	Physicians Health Plan — Lansing Board of Water and Light	Sparrow PHP — Medicaid	Sparrow PHP — MIChild	Physicians Health Plan — Self Funded (L0000264; DAS00100, 200, 300)	Sparrow Physicians Health Network — SPHN (MNA, IUE, UAW & SEIU. DAS00600, 900, 1000, 1200)	Sparrow Physicians Health Network — SPHN (Non-Union, DAS01100)	PHP Insurance Company — PPO
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 362.07, 362.35, 362.36, 362.52, 362.53, 362.62), Corifact/Factor XIII, glucarpidase (Voraxaze) testosterone undecanoate (Andriol), ramucirumab (Cyramza), vedolizumab (Entyvio), antihemophilic factor (Alprolix Factor IX), epoetin beta & siltuximab (Sylvant)	√	√	√	√	√	√	√	√
J3590	# Unclassified biologics	√	√	√	√	√	√	√	√
J7178	# human fibrinogen concentrate (RiaStap)	√	√	▲	▲	√	√	√	√
J7180	# Factor products	√	√			√	√	√	√
J7181	# factor XIII A-subunit	√	√	▲	▲	√	√	√	√
J7182	# factor VIII (NovoEight)	√	√	▲	▲	√	√	√	√
J7183-J7187	# Factor products	√	√	▲	▲	√	√	√	√
J7189-J7199	# Factor products	√	√	▲	▲	√	√	√	√
J7200	# factor IX (Rixubis)	√	√	▲	▲	√	√	√	√
J7201	# factor IX FC fusion protein	√	√	▲	▲	√	√	√	√
J7308	# aminolevulinic acid HCI (Levulan Kerastick)	√	√	√	√	√	√	√	√
J7309	# methyl aminolevulinate (MAL), (Metvixia)	√	√	√	√	√	√	√	√
J7312	# dexamethasone (Ozurdex)	√	√	√	√	√	√	√	√
J7316	# ocriplasmin (Jetrea)	√	√	√	√	√	√	√	√
J7508	# tacrolimus (Prograf)	√	√	√	√	√	√	√	√
J7527	# everolimus (Zortress)	√	√	√	√	√	√	√	√
J7686	# treprostinil	√	√	√	√	√	√	√	√
J7699	# NOC drugs, inhalation solution administered through DME	√	√	√	√	√	√	√	√
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	√	√	√	√	√	√	√	√
J8562	# fludarabine phosphate (Oforta)	√	√	√	√	√	√	√	√
J8565	# gefitinib (Iressa)	√	√	▲	▲	√	√	√	√
J8700	# temozolomide (Temodar)	√	√	√	√	√	√	√	√
J9002	# doxorubicin hydrochloride liposomal doxil (Lipodox)	√	√	√	√	√	√	√	√
J9019	# asparaginase (Erwinaze)	√	√	√	√	√	√	√	√

PHYSICIANS HEALTH PLAN NOTIFICATION/PRIOR AUTHORIZATION TABLE-ALL PRODUCTS

Code	Drug	Commercial & Market Place Plans	Lansing Board of Water and Light	Medicaid	MIChild	Self Funded (L0000264; DAS00100, 200, 300)	SPHN (MNA, IUE, UAW & SEIU. DAS00600, 900, 1000, 1200)	SPHN (Non-Union, DAS01100)	PPO
J9027	# clofarabine (Clolar)	√	√	√	√	√	√	√	√
J9033	# bendamustine hydrochloride (Treanda)	√	√	√	√	√	√	√	√
J9035	# bevacizumab (Avastin)	√	√	√	√	√	√	√	√
J9041	# bortezomib (Velcade)	√	√	△	△	√	√	√	√
J9042	# brentuximab vedotin (Adcetris)	√	√	√	√	√	√	√	√
J9043	# cabazitaxel (Jevtana)	√	√	√	√	√	√	√	√
J9047	# carfilzomib (Kyprolis)	√	√	√	√	√	√	√	√
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)	√	√	√	√	√	√	√	√
J9262	# omacetaxine mepesuccinate (Synribo)	√	√	√	√	√	√	√	√
J9268	# pentostatin (Nipent)	√	√	√	√	√	√	√	√
J9301	# obinutuzumab (Gazyva)	√	√	√	√	√	√	√	√
J9302	# ofatumumab (Arzerra)	√	√	√	√	√	√	√	√
J9306	# pertuzumab (Perjeta)	√	√	√	√	√	√	√	√
J9307	# pralatrexate(Folotyn)	√	√	√	√	√	√	√	√
J9310	# rituximab (Rituxan)	√	√	√	√	√	√	√	√
J9315	# romidepsin (Istodax)	√	√	√	√	√	√	√	√
J9328	# temozolomide (Temodar)	√	√	√	√	√	√	√	√
J9351	# topotecan (Hycamtin)	√	√	√	√	√	√	√	√
J9354	# ado-trastuzumab emtansine (Kadcyla)	√	√	√	√	√	√	√	√
J9355	# trastuzumab (Herceptin)	√	√	√	√	√	√	√	√
J9371	# vincristine sulfate liposome (Marqibo)	√	√	√	√	√	√	√	√
J9400	# ziv-aflibercept (Zaltrap)	√	√	√	√	√	√	√	√
J9999	# Unclassified biologics	√	√	√	√	√	√	√	√
Q2050	# doxorubicin hydrochloride liposomal doxil (Lipodox)	√	√	√	√	√	√	√	√
Q3026	# Interferon Beta-1A (Rebif) ✚	√	√	√	√	**** N/A	**** N/A	**** N/A	√
Q4081	# epoetin alfa (Epogen, Procrit)	√	√	√	√	√	√	√	√
Q4096	# antihemophilic factor (Alphanate)	√	√	△	△	√	√	√	√
Q9972	Injection, epoetin beta, 1 microgram, (for ESRD on dialysis)	√	√	√	√	√	√	√	√
Q9973	Injection, epoetin beta, 1 microgram, (non-ESRD use)	√	√	√	√	√	√	√	√
	# Compounded drugs: all	√	√	√	√	**** N/A	√	√	√

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.

PHYSICIANS HEALTH PLAN NOTIFICATION/PRIOR AUTHORIZATION TABLE-ALL PRODUCTS

	Physicians Health Plan	Physicians Health Plan	Sparrow PHP	Sparrow PHP	Physicians Health Plan	Sparrow Physicians Health Network	Sparrow Physicians Health Network	PHP Insurance Company
	Commercial & Market Place Plans	Lansing Board of Water and Light	Medicaid	MIChild	Self Funded (L0000264; DAS00100, 200, 300)	SPHN (MNA, IUE, UAW & SEIU. DAS00600, 900, 1000, 1200)	SPHN (Non-Union, DAS01100)	PPO

*   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, be covered at the non-network benefit level, not be a covered benefit. 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.
Δ 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 claims for Medicaid/FamilyCare, Childrens Special Health Care Services (CSHCS) or MIChild CSHCS to Magellan/Michigan Department of Community Health (MDCH) for the services indicated. MDCH may have authorization requirements. You must contact Magellan at 1-877-864-9014. 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 member's card.
√* Check member's identification card to determine who is to be notified of service.
R - Lansing Board of Water and Light: It is recommended the service be reviewed to determine medical necessity in advance of the service. If it is not clinically reviewed prior to the service medical necessity will be determined when the claim is received for processing.