Professional Provider Report

A newsletter for professional providers and their staff members

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What's Inside

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The Professional Provider Report is published by the Professional Relations department of Blue Cross and Blue Shield of Kansas.

Sarah Shaw, Communications Coordinator



2022 Annual CAP Publication Information Available for Review

The 2022 Competitive Allowance Program (CAP) changes and annual reports are available for your review at https://www. bcbsks.com/CustomerService/Providers/Publications/professional/ PolicyMemos/.

For more information regarding the annual distribution of CAP materials, contact your professional relations representative or Provider Network Services in Topeka at 785-291-4135 or 800-432-3587.





K-TRACS: Promoting Patient Safety Through Prevention of Prescription Drug Misuse, Abuse and Diversion

When prescribing and dispensing opioid medications, Blue Cross and Blue Shield of Kansas (BCBSKS) encourages all prescribing providers to use Kansas Tracking and Reporting of Controlled Substances, or K-TRACS.

What is K-TRACS?

K-TRACS is the prescription monitoring program that tracks the use of controlled substances and allows a provider to access a controlled substance report for patients. Through the K-TRACS portal, providers can access what controlled substances a patient has filled, as well as see the quantities, prescribing providers, and pharmacies associated with each prescription. Concerns can be easily identified in-office and addressed at the point

of discovery. Imagine looking up a patient only to find they have visited 15 physicians and filled 15 controlled substance prescriptions in the past 90 days. How can this patient information be used to improve your encounter with this patient while they are in your office? It's important to remember that addiction or misuse of opioids can happen to anyone. It often starts innocently - after a knee replacement, tooth extraction, or accident and is not discriminatory in nature, K-TRACS offers tools to identify individuals who may need assistance with using controlled substances in a safe manner.

Using the K-TRACS provider toolkit

A provider toolkit is available from

K-TRACS to assist prescribers with educating patients about the safe use of controlled substance medications. K-TRACS has developed pocket guides to help guide prescribing decisions. Patient safety brochures and flyers can also be downloaded to provide your patients with information about the safe use of opioids, stimulants, and other controlled substances. The provider toolkit is available on the K-TRACS website, pharmacy. ks.gov/k-tracs.

Integrating K-TRACS

Many electronic medical record (EMR) systems can be integrated with K-TRACS. With an integrated system, you will no longer have to use a separate system to access K-TRACS reports, saving you time and effort. The Kansas State Board of Pharmacy, the Kansas Department of Health and Environment, and Appriss Health have partnered to provide all prescribers and pharmacists in Kansas with access to K-TRACS directly in electronic health records and pharmacy management systems. The project is funded by a grant from the Centers for Disease Control and Prevention.

To request integration, fill out the Integration Request Form. Apriss Health will contact you and/or your EHR system vendor with next steps.



Biosimilars - Safe, Effective Treatment Options

A biosimilar product is a biological product that is highly similar in structure and function to and has no clinically meaningful differences from an existing FDA-approved reference product. Minor differences in clinically inactive components, such as stabilizers or buffers, are allowed. These differences can occur between the biosimilar product and the reference product, and can also occur between batch-tobatch differences of the reference product. These slight differences are expected.¹ Biosimilars cost less than the reference products and are effective in lowering the cost of treatment.

The FDA has approved 29 biosimilars in the United States, although not all have entered the market to date. ²Examples of currently prescribed biosimilars are listed in the table below:

Reference Product	Biosimilar
Avastin (bevacizumab)	Mvasi (bevacizumab-awwb) Zirabev (bevacizumab-bvzr)
Epogen (epoetin-alfa)	Retacrit (epoetin alfa-epbx)
Herceptin (trastuzumab)	Herzuma (trastuzumab-pkrb) Kanjinti (trastuzumab-anns) Ogivri (trastuzumab-dkst) Ontruzant (trastuzumab-dttb) Trazimera (trastuzumab-qyyp)
Neulasta (pegfilgrastim)	Fulphila (pegfilgrastim-jmdb) Nyvepria (pegfilgrastim-apgf) Udenyca (pegfilgrastim-cbqv) Ziextenzo (pegfilgrastim-bmez)
Neupogen (filgrastim)	Nivestym (filgrastim-aafi) Zarxio (Filgrastim-sndz)
Remicade (infliximab)	Avsola (infliximab-axxq) Inflectra (Infliximab-dyyb) Renflexis (Infliximab-abda)
Rituxan (rituximab)	Riabni (rituximab-arrx) Ruxience (rituximab-pvvr) Truxima (rituximab-abbs)

BCBSKS encourages providers to use biosimilars as a safe, effective treatment method in our ongoing efforts to reduce the total cost of care for our members. 1 https://www.fda.gov/drugs/ biosimilars/biosimilar-and-interchangeable-products#biological

2 https://www.fda.gov/drugs/biosimilars/biosimilar-product-information

Pharmaceutical Formulary Update

Prime Therapeutics updates the Blue Cross and Blue Shield of Kansas formulary (preferred medication list) on a quarterly basis. Please refer to the links below when prescribing or dispensing medications for your BCBSKS patients. Coverage is subject to the limitations of the member's individual plan.

For commercial members, go

to: https://www.myprime.com/ content/dam/prime/memberportal/ forms/2021/FullyQualified/Other/ ALL/BCBSKS/COMMERCIAL/ KSPREFDRUG/2021 KS Alpha Drug List.pdf

For BlueCare/EPO members, go to: https://www.myprime.com/ content/dam/prime/memberportal/ forms/2021/FullyQualified/Other/ ALL/BCBSKS/COMMERCIAL/ KSBLCREPO1/2021 KS 6T BlueCare Medication List.pdf

For BlueEdge/ResultsRx medication list, go to: https:// www.myprime.com/content/ dam/prime/memberportal/ forms/2021/FullyQualified/Other/ ALL/BCBSKS/COMMERCIAL/ KSRXDRUG/2021_KS_ BlueEdge_MedicationList.pdf



Provider Attestation 2022 Change

The qualifying periods changed for the 2022 Provider Information Portal (PRT) QBRP measure from twice a year to a rolling 90 days for each individual provider within your group. This measure helps us verify accurate provider directories required per the No Surprises Act. The incentive remains at 3%.

The following is a list of incentive effective dates and the corresponding qualifying periods:

- Effective January 1, 2022, attest between September 2021 - November 2021
- Effective April 1, 2022, attest between December 2021 -February 2022

Billing Reminders

To ensure quick and accurate claims processing, please keep in mind these billing reminders:

- BCBSKS will allow only one initial observation service unless the 23-hour observation extends into the next calendar day. In that instance a discharge observation would also be allowed. In any other scenario, regardless of the length of stay, the subsequent observation services are content of service to the initial observation service or billed as subsequent out-patient visits.
- Initial hospital care codes (99221-99223) should only be billed by the admitting physician. For inpatient encounters by

- Effective July 1, 2022 , attest between March 2022 May 2022
- Effective October 1, 2022, attest between June 2022 -August 2022

To complete the provider attestations, take the following actions:

1. Sign into Availity

2. Select the Payer Spaces heading

3. Select Blue Cross Blue Shield of Kansas

4. Select the BCBSKS Provider Secure Section (Blue Access) link

physicians other than the admitting physician, consultation codes (99251-99255) or subsequent hospital care codes (99231-99233) should be billed as appropriate.

The Patient Information for Other Party Liability (to be completed by Provider) Form should only be completed with services that are related to an accidental injury that happened somewhere other than the members home. This form may also be completed during annual checkups to help keep records up to date. Part of the form is shown to the right: 5. Select the name/NPI for your organization

6. Select the Provider Information heading

7. Select Provider form

8. Complete the form for each individual provider listed at the bottom of the page.

Please contact your provider relations representative if you have additional questions.

Patient Information Form

for Other Party Liability (to be completed by Provider)

First Name	MI	Patient	First Name
Last Name		Patient	Last Name
Member ID Number		Provider	
Section 2 – Other Coverage Information	on		
Annually, Blue Cross and Blue Shield of Kar been a year since your last visit to this provi			
Are you, your spouse or your covered dependent children enrolled in other insurance (medical, dental, vision or prescription – NOT Medicare, SPS/Medicaid/2		Name of Other Insura	
children enrolled in other insurance (medical	l, dental,	Name o	of Other Insura
children enrolled in other insurance (medical	l, dental,		
children enrolled in other insurance (medica vision or prescription – NOT Medicare, SRS	l, dental, /Medicaid)?		of Other Insura
children enrolled in other insurance (medica vision or prescription – NOT Medicare, SRS I Yes I No If you answered Yes, please complete all rei	l, dental, /Medicaid)?	Address	
children enrolled in other insurance (medica vision or prescription – NOT Medicare, SRS I Yes I No If you answered Yes, please complete all rei	l, dental, /Medicaid)?	Address City State	s of Other Insu
children enrolled in other insurance (medica vision or prescription – NOT Medicare, SRS Yes No If you answered Yes, please complete all ren questions in this section.	I, dental, /Medicaid)? maining	Address City State	s of Other Insu ZIP Code

Section 3 – Information About Injury

We also attempt to verify if injuries, carpel tunnel, heart attacks, hernias and t covered by worker's compensation or auto insurance. If your visit is related to described above, please answer the following questions *unless this is a follow form previously*.



Highmark Prior Authorization Requirements

Effective August 1, 2021 Highmark expanded its Advanced Imaging and Cardiology Services program (managed by eviCore) to include out-of-area and out-of-network providers/ services serving Highmark members enrolled in its fully insured Commercial, Medicare Advantage, Affordable Care Act plans, and members of select self-insured groups. Highmark's prior authorization requirements ensure that members receive the most appropriate care delivery in alignment with nationally accepted evidence-based guidelines.

The program includes prior authorization for elective or nonemergency outpatient radiology or cardiac imaging services (Prior authorization does not apply to services that are performed in the emergency room or during an inpatient stay.) Services included are listed in the table below.

If you have additional questions, you can contact your professional relations representative or Provider Network Services in Topeka at 785-291-4135 or 800-432-3587.

Radiology	Cardiac Imaging
Magnetic resonance imaging (MRI)	Cardiac CT
Magnetic resonance angiograms (MRAs)	Cardiac MRI
Positron emission tomography (PET) scans	Diagnostic heart catheterization
Positron emission tomography – computed tomography (PET-CT)	Myocardial perfusion imaging (SPECT and PET)
Computerized tomography (CT) scans	Nuclear cardiac imaging
Computed tomography angiography (CTA) scans	Stress echocardiogram
Nuclear medicine	Stress testing
	Transesophageal echocardiogram
	Transthoracic echocardiogram

Web Changes – Medical Policy

Since the publication of Professional Provider Report <u>S-1-21</u>, the following policies have been posted at: <u>https://www.bcbsks.com/CustomerService/Providers/MedicalPolicies/policies.shtml</u>

- Ambulatory Event Monitors and Mobile Cardiac
 Outpatient Telemetry
- Amniotic Membrane and Amniotic Fluid
- Aqueous Shunts and Stents for Glaucoma
- Artificial Intervertebral Disc: Lumbar Spine
- Autografts and Allografts in the Treatment of Focal Articular Cartilage Lesions
- Automated Percutaneous and Endoscopic Discetomy
- Bio-Engineered Skin and Soft Tissue Substitutes
- BRCA1 and BRACA2 Testing
- Bronchial Thermoplasty
- Catheter Ablation as Treatment for Atrial Fibrillation
- Cochlear Implant
- Cone Beam Computed Tomography (CBCT) (Availity login required)
- Continuous Passive Motion in the Home Setting
- Coronary Computed Tomography Angiography with Selective Noninvasive Fractional Flow Reserve
- Coronary Computed Tomography Angiography with Selective Noninvasive Fractional Flow Reserve
- Cytochrome p450 Genotyping
- Deep Brain Stimulation
- Diagnosis and Medical Management of Obstructive Sleep Apnea Syndrome
- Dry Needling of Myofascial Trigger Points
- Dynamic Posturography
- Electrical Bone Growth Stimulation of the Appendicular Skeleton
- Enhanced External Counterpulastion (EECP)
- Extracranial Carotid Artery Stenting
- Gene Expression Profiling for Cutaneous Melanoma
- Genetic and Protein Biomarkers for the Diagnosis and Cancer Risk Assessment of Prostate Cancer

- Genetic Cancer Susceptibility Panels Using Next
 Generation Sequencing
- Genetic Testing for Marfan Syndrome, Thoracic Aortic Aneurysms and Dissections, and Related Disorders
- Identification of Microorganisms Using Nucleic Acid Testing
- Implantable Bone-Conduction and Bone-Anchored Hearing Aids
- Implantable Cardioverter Defibrillators
- Influenza Virus Diagnostic Testing and Treatment in the Outpatient Setting
- LASIK (laser assisted in situ keratomileusis)
- Low Intensity Pulsed Ultrasound Fracture Healing Device
- Miscellaneous Genetic and Molecular Diagnostic Tests
- Molecular Testing for the Management of Pancreatic Cysts, Barrett's Esophagus, and Solid Pancreaticobiliary Lesions
- Myocardial Strain Imaging
- Non-invasive Positive Pressure Ventilation for Patients with Chronic Obstructive Pulmonary Disease (COPD)
- Open and Thoracoscopic Approaches to Treat Atrial Fibrillation and Atrial Flutter (Maze and Related Procedures)
- Open and Thoracoscopic Approaches to Treat Atrial Fibrillation and Atrial Flutter (Maze and Related Procedures)
- Orthopedic Applications of Platelet-Rich Plasma
- Percutaneous Intradiscal Electrothermal Annuloplasty, Radiofrequency Annuloplasty, and Biacuplasty
- Percutaneous Left Atrial Appendage Closure Devices for Stroke Prevention in Atrial Fibrillation

