

Provider Newsletter



<https://www.summitcommunitycare.com/provider>

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Medical drug *Clinical Criteria* updates

June 2019

On June 20, 2019, the Pharmacy and Therapeutic (P&T) Committee approved *Clinical Criteria* applicable to the medical drug benefit for Summit Community Care. These policies were developed, revised or reviewed to support clinical coding edits.

Effective dates are reflected in the [Clinical Criteria web posting](#).

AR-NL-0052-19

August 2019

On August 16, 2019, the Pharmacy and Therapeutics (P&T) Committee approved *Clinical Criteria* applicable to the medical drug benefit for Summit Community Care. These policies were developed, revised or reviewed to support clinical coding edits

Effective dates are reflected in the [Clinical Criteria web posting](#).

AR-NL-0057-19

The *Clinical Criteria* is publicly available on the [provider website](#). Visit the [Clinical Criteria website](#) to search for specific policies.

Please submit any questions via [email](#).

Electronic submission is preferred method for requesting pharmacy prior authorization

Our electronic prior authorization (ePA) process is the preferred method for submitting pharmacy prior authorization requests. The online process is faster and easier to complete, and the response is automatic, which helps patients get their medications sooner. You can complete this process through your current electronic health record/electronic medical record (EHR/EMR) system or via the following ePA sites:

- Surescripts®:
<https://providerportal.surescripts.net/providerportal>
- CoverMyMeds®:
<https://www.covermymeds.com/main>

Creating an account is free and takes just a few minutes. If you are experiencing any issues or have a question about:

- The Surescripts portal, call 1-866-797-3239.
- The CoverMyMeds portal, call 1-866-452-5017.

For questions regarding pharmacy benefits, contact your IngenioRx call center at 1-866-462-0022.

AR-NL-0053-19

Coding spotlight – provider’s guide to coding behavioral and emotional disorders

ICD-10-CM coding

Codes within categories F90-F98 represent behavioral and emotional disorders with onset usually occurring in childhood and adolescence and may be used regardless of the age of the patient.



Attention deficit hyperactivity disorder (ADHD) is among these common childhood disorders. While ADHD is not a learning disability, it can impact the ability to learn. This disorder is characterized by classic symptoms of inattention, hyperactivity and impulsivity.

Three subtypes of ADHD have been identified:

- Hyperactive/impulsive type – The patient does not show significant inattention.
- Inattentive type – The patient does not show significant hyperactive-impulsive behavior.
- Combined type – Patient displays both inattentive and hyperactive-impulsive symptoms.



[Read more online.](#)

AR-NL-0058-19

Coding spotlight – provider’s guide to coding respiratory diseases

ICD-10-CM coding

Respiratory diseases are classified in categories J00 through J99 in Chapter 10, “Diseases of the Respiratory System” of the *ICD-10-CM Official Guidelines for Coding and Reporting*.

Pneumonia

Pneumonia is coded in several ways in ICD-10-CM. Combination codes that account for both pneumonia and the responsible organism are included in Chapter 1, “Certain Infectious and Parasitic Diseases” and Chapter 10, “Diseases of the Respiratory System.” Examples of appropriate codes for pneumonia include:

- J15.0 – pneumonia due to Klebsiella
- J15.211 – pneumonia due to Staphylococcus aureus
- J11.08 + J12.9 – viral pneumonia with influenza.



[Read more online.](#)

AR-NL-0060-19

New clinical guideline: pneumatic compression devices, effective February 1, 2020



Summit Community Care will implement the following clinical guideline effective February 1, 2020, to support the review of outpatient pneumatic compression devices (PCDs) after outpatient orthopedic procedures.

Federal and state law, as well as state contract language and CMS guidelines, including definitions and specific contract provisions/exclusions, take precedence over these prior authorization rules and must be considered first when determining coverage. Noncompliance with new requirements may result in denied claims.

CG-DME-46 Pneumatic Compression Devices for Prevention of Deep Vein Thrombosis of the Lower Limbs

This document addresses the use of PCDs for the prevention of deep vein thrombosis (DVT) of the lower limbs. This therapy involves the use of an inflatable garment and an electrical pneumatic pump. The garment is intermittently inflated and deflated with cycle times and pressures that vary between devices. PCDs are used in clinics or can be purchased or rented for home use for prevention and treatment of a number of conditions. This document only addresses the home use of PCDs for post-outpatient orthopedic procedures.

Note: This document addresses devices for the prevention of DVT only. Pneumatic devices used in the treatment or prevention of lymphedema, venous insufficiency or therapy for musculoskeletal injuries are not addressed in this document, nor are devices for prevention of DVT post-major surgical procedures.

Not medically necessary

The use of PCDs for prevention of thromboembolism of the lower-limbs following outpatient orthopedic surgery is considered not medically necessary for all indications.

AR-NL-0051-19

Prior authorization (PA) requirements

Effective November 1, 2019, PA requirements will change for a number of services to be covered by Summit Community Care for Medicaid members.



[Read more online.](#)

AR-NL-0044-19

Effective February 1, 2020, PA requirements will change for a number of services to be covered by Summit Community Care for our members.



[Read more online.](#)

ARPEC-0056-19

Federal and state law, as well as state contract language and Centers for Medicare & Medicaid Services guidelines, including definitions and specific contract provisions/exclusions, take precedence over these PA rules and must be considered first when determining coverage. **Noncompliance with new requirements may result in denied claims.**

To request PA, you may use one of the following methods:

- Web: <https://www.availity.com>
- Fax:
 - 501-224-1355 (nonbehavioral health)
 - 1-877-434-7578 (behavioral health)
 - 1-844-487-9292 (general pharmacy)
 - 1-844-487-9294 (medical injectables)
- Phone: 1-844-462-0022

Not all PA requirements are listed here. Detailed PA requirements are available to providers on our provider website (<https://www.summitcommunitycare.com/provider> > Resources > Prior Authorization Lookup Tool) and at <https://www.availity.com>. Providers may also call Provider Services at 1-844-462-0022 for PA requirements.