



Three Sugar Creek Center, Suite 300
Sugar Land, TX 77478

SA-19264K2
Physicians of East Texas

111 Gaslight Blvd Ste B
Lufkin, TX 75904-3190



Important information for your office

As published in the December 1, 2019, edition of Aetna OfficeLink Updates™

000289



Improving how we communicate updates

We regularly review and adjust our clinical payment and coding policies. We know these changes are important to you and your staff. Beginning March 2020, we'll share updates on a monthly basis. You will receive an email notification when new information is available. Or you can go to [Aetna.com](https://www.aetna.com) to find the updates.

Changes to our National Precertification List (NPL)

Important NPL updates

The following new-to-market drugs require precertification:

- Cutaquig® (IVIG) — precertification for both the drug and the site of care required effective **August 1, 2019**.
- Polivy™ (polatuzumab vedotin-piiq) — precertification required **effective September 13, 2019**.
- Kanjinti™ (trastuzumab-anns) — precertification required effective **November 1, 2019**.

The following drugs will require precertification, including Part B step therapy review, effective **January 1, 2020**, for Medicare Advantage members only:

- Abraxane® (paclitaxel)
- Orendia® (abatacept)
- Eylea® (aflibercept)



- Lemtrada® (alemtuzumab)
- Botox® (onabotulinumtoxinA)
- Myobloc® (rimabotulinumtoxinB)
- Xeomin® (incobotulinumtoxinA)
- Aranesp® (darbepoetin alfa)
- Epogen®, Procrit® (epoetin alfa)
- Xgeva® (denosumab)
- Neupogen® (filgrastim [G-CSF])
- Cuvitru™ (immune globulin)
- Bivigam® (immune globulin)
- Gammaplex® (immune globulin)
- Gamunex®-C/Gammaked® (immune globulin)
- Carimune NF® (immune globulin)
- Octagam® (immune globulin)
- Gammagard® (immune globulin)
- Flebogamma®/Flebogamma® DIF (immune globulin)
- Hyqvia® (immune globulin/hyaluronidase)
- Panzyga® (immune globulin)
- Remicade® (infliximab)
- Tysabri® (natalizumab)
- Neulasta® (pegfilgrastim)
- Lucentis® (ranibizumab)
- Ilumya™ (tildrakizumab)
- Actemra® (tocilizumab)
- Stelara® (ustekinumab)
- Entyvio® (vedolizumab)
- Remodulin® (treprostinil sodium)
- Durolane® (hyaluronan or derivative)
- GenVisc® (hyaluronan or derivative)
- Hyalgan® (hyaluronan or derivative)
- Hymovis® (hyaluronan or derivative)
- Euflexxa™ (hyaluronan or derivative)
- Orthovisc® (hyaluronan or derivative)
- Synvisc® or Synvisc-One® (hyaluronan or derivative)
- Monovisc® (hyaluronan or derivative)
- Gelsyn-3™ (hyaluronan or derivative)
- TriVisc® (hyaluronan or derivative)
- Rituxan® (rituximab)
- Herceptin Hylecta™ (trastuzumab, 10 mg; and hyaluronidase-oysk)
- Inflectra® (infliximab-dyyb, biosimilar)
- Renflexis® (infliximab-abda, biosimilar)
- Fulphila™ (pegfilgrastim-jmdb, biosimilar)
- Nivestym™ (filgrastim-aafi, biosimilar)

We encourage you to submit precertification requests at least two weeks before the scheduled services.

To save time, request precertification electronically — it's fast and simple. Most precertification requests can be submitted electronically through the provider website or by using your Electronic Medical Record (EMR) system portal.

You can find more information about precertification under the General Information section of the [**NPL**](#).

We've enhanced our claims editing process

Our claim system edits complex claim scenarios to make sure coding and modifier usage aligns with industry guidelines. For example, we evaluate appropriate utilization of separate and distinct service modifiers as well as the separately identifiable evaluation and management modifiers.

When appropriate, we evaluate claims against the following guidelines:

- Internal coding guidelines
- The Centers for Medicare & Medicaid Services medical coverage, payment and coding policies
- The American Medical Association Current Procedural Terminology® (CPT®) coding standards

Healthcare Common Procedure Coding System (HCPCS) code updates to specific drug contract service groupings

Individual service codes will be assigned within contract service groupings. Changes to an individual provider's compensation will depend on the presence or absence of specific service groupings within the contract. The changes are outlined below.

All updates will start on **March 1, 2020**, unless otherwise noted.

Codes	Provider types affected	What's changing
J1095, J2186, J2787	Facilities including acute short-term hospitals, free-standing ambulatory surgery centers, skilled	These codes will be added to the following contract service groupings: • All drugs or drug agents without specific rate set forth



	nursing facilities	above or herein • Drugs • Chemotherapy and All Other Drugs • Chemotherapy & All Oth Drg • All Other Drugs
Q5109, Q5111	Facilities including acute short-term hospitals, free-standing ambulatory surgery centers, skilled nursing facilities, infusion facilities, dialysis facilities, physician providers, home health providers	These codes will be added to the following contract service groupings: • All drugs or drug agents without specific rate set forth above or herein • Drugs • Chemotherapy and All Other Drugs • Chemotherapy & All Oth Drg • All Other Drugs • All Drugs, agents, inj. Drugs • Injectable Drugs • All Outpatient Drugs including C, J, Q and S codes
J9022, J9023, J9203, J9285	Facilities including acute short-term hospitals, free-standing ambulatory surgery centers, skilled nursing facilities	These codes will be added to the following contract service groupings: • Drugs • Chemotherapy and All Other Drugs • Chemotherapy and All Oth Drg • Chemotherapy Drugs • All drugs or drug agents without specific rate set forth above or herein
J3591	Facilities including acute short-term hospitals, free-standing ambulatory surgery centers, skilled nursing facilities, infusion facilities, dialysis facilities, physician providers, home health providers	These codes will be added to the following contract service groupings: • Drugs • Chemotherapy and All Other Drugs • All Other Drugs • Chemotherapy & All Oth Drg • All drug or drug agents without specific rate set forth above or herein
J0185, J0517, J0567, J0584, J0599, J0841, J1301, J1454, J1628, J1746, J2062, J2797 J3245, J3304, J3397, J3398, J7170, J7177, J7203, J7318, J7329 Q9991, Q9992, Q5105, Q5106, Q5108, Q5110	Facilities including acute short-term hospitals, free-standing ambulatory surgery centers, skilled nursing facilities	These codes will be removed from the following contract service grouping: • Chemotherapy Drugs

This is subject to regulatory review and separate notification in Washington state.

Emergency Room Level of Care

Effective **March 1, 2020**, the Emergency Room Level of Care payment policy will apply to all outpatient facility bill types.

Solid tumor panels

As of **March 1, 2020**, when a solid tumor molecular pathology service is reported with five or more related molecular pathology services and a corresponding solid tumor diagnosis code, we will allow one instance of CPT 81445 for the solid tumor targeted genomic sequence analysis panel.

Third Party Claim and Code Review Program

As of **March 1, 2020**, you may see new claims edits. You can view these edits on our provider website. You'll have access to our prospective claims editing disclosure tool. After you log in, My Health Plans > Aetna > Claims > Policy Information > Expanded Claim Edits to find out if our new claims edits will apply to your claim.

These new edits are part of our Third Party Claim and Code Review Program. They support our continuing effort to process claims accurately.

This is subject to regulatory review and separate notification in Washington state.

Medical specialty drugs

Effective **March 1, 2020** we will enhance our daily unit limit claim edits for medical specialty drugs. We will apply diagnostic and member characteristics (age, diagnosis, gender, etc.) to determine the specialty drugs quantity limits. This enhancement will be a part of the new Novologix® online prior authorization (PA) system.

Endoscopy payment policy postponed

In the September edition of OfficeLink Updates™, we told you that we'd be implementing a new policy effective **December 1, 2019**, regarding endoscopy payments.

The policy would allow us to adjust payment for multiple endoscopy procedures in the same family when billed by the same surgeon or assistant surgeon on the same date of service for the same member.



However, due to issues that came up during our testing phase, we've decided to postpone implementation of this policy indefinitely.

Timely notification for acute rehabilitation centers and skilled nursing facilities

To ensure that our members receive appropriate care in an acute rehabilitation center or a skilled nursing facility, our concurrent review nurses will request clinical information in order to secure an admission or a continued stay for a Medicare member.

When clinical information is requested, it's important that you submit the requested information within one or two calendar days of the request. If we do not receive the requested information within this time frame, coverage for the days will be denied administratively for lack of precertification. If the member is in an approved facility and a continued stay review is requested but no clinical information is received, we'll deny uncovered days administratively.

Changes to commercial drug lists will occur on April 1, 2020

On **April 1**, we'll update our pharmacy drug lists.

You'll be able to view the changes as early as February 1, 2020. They'll be available then on our [Formularies & Pharmacy Clinical Policy Bulletins](#) page.

Ways to request a drug prior authorization

- Submit your completed request form through our [provider website](#).
- Fax your completed [prior authorization request form](#) to **1-877-269-9916**.
- Call the Aetna Pharmacy Precertification Unit at **1-855-240-0535 (TTY: 711)**.

The changes, including precertification requirements, quantity limits and step-therapy programs, will affect all Pharmacy Management drug lists, subject to applicable state restrictions.

For more information, call the Aetna Pharmacy Management Provider Help Line at **1-800-238-6279 (TTY: 711) (1-800-AETNA RX)**.

aetna.com

©2019 Aetna Inc.

83.03.866.1 D (12/19)