

# Provider Newsletter

<https://providers.healthybluelua.com>



Medicaid Managed Care  
Dual Advantage

January 2021



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## Table of Contents

### Medicaid:

**Disease Management/Population Health program** Page 2

**Updates to AIM Specialty Health Advanced Imaging Clinical Appropriateness Guidelines** Page 3

### Dual Advantage:

**Healthy Blue Dual Advantage (HMO D-SNP) 2021 updates** Page 5

**Transition to AIM Specialty Health Rehabilitative Services Clinical Appropriateness Guidelines** Page 5

**SNF admission reporting requirements for D-SNP plans** Page 6

**Medical Policies and Clinical Utilization Management Guidelines update** Page 7

## Disease Management/Population Health program

Disease Management/Population Health is designed to support providers in caring for patients with chronic health care needs. Healthy Blue provides members enrolled in the program with continuous education on self management, assistance in connecting to community resources, and coordination of care by a team of highly qualified professionals whose goal is to create a system of seamless health care interventions and communications.



### Who is eligible?

Disease Management/Population Health case managers provide support to members with:

- Asthma.
- Bipolar disorder.
- COPD.
- Diabetes.
- Congestive heart failure.
- Coronary artery disease.
- HIV/AIDS.
- Hypertension.
- Major depressive disorder — adults.
- Major depressive disorder — children and adolescents.
- Schizophrenia.
- Substance use disorder.

Our case managers use member-centric motivational interviewing to identify and address health risks, such as tobacco use and obesity, to improve condition-specific outcomes. Interventions are rooted in evidence-based clinical practice guidelines from recognized sources. We implement continuous improvement strategies to increase evaluation, management and health outcomes.

For more information on our program and how to refer a Healthy Blue member for this program, please visit our [website](#).

Your input and partnership is valued. Once your patient is enrolled in the Disease Management/Population Health program, you will be notified by the case manager assigned.

We look forward to working with you.

BLA-NL-0276-20

# Updates to AIM Specialty Health *Advanced Imaging Clinical Appropriateness Guidelines*

Effective for dates of service on and after December 19, 2020, the following updates will apply to the AIM Specialty Health<sup>®</sup>\* advanced imaging of the chest, vascular imaging and AIM oncologic imaging *Clinical Appropriateness Guidelines*.

## Vascular imaging updates

- **Aneurysm of the abdominal aorta or iliac arteries:**
  - Added new indication for asymptomatic enlargement by imaging
  - Clarified surveillance intervals for stable aneurysms as follows:
    - Treated with endografts, annually
    - Treated with open surgical repair, every five years
- **Stenosis or occlusion of the abdominal aorta or branch vessels, not otherwise specified:**
  - Added surveillance indication and interval for surgical bypass grafts

## Advanced imaging of the chest updates

- **Tumor or neoplasm:**
  - Allowed follow-up of nodules less than 6 mm in size seen on incomplete thoracic CT scan, in alignment with follow-up recommendations for nodules of the same size seen on complete thoracic CT scan
  - Added new criteria for which follow-up is indicated for mediastinal and hilar lymphadenopathy
  - Separated mediastinal/hilar mass from lymphadenopathy, which now has its own entry
- **Parenchymal lung disease — not otherwise specified:**
  - Removed as it is covered elsewhere in the document (parenchymal disease in occupational lung diseases and pleural disease in other thoracic mass lesions)

- **Interstitial lung disease, nonoccupational including idiopathic pulmonary fibrosis:**
  - Defined criteria warranting advanced imaging for both diagnosis and management
- **Occupational lung disease (adult only):**
  - Moved parenchymal component of asbestosis into this indication
  - Added berylliosis
- **Chest wall and diaphragmatic conditions:**
  - Removed screening indication for implant rupture due to lack of evidence indicating that outcomes are improved
  - Limited evaluation of clinically suspected rupture to patients with silicone implants



## Updates to AIM *Advanced Imaging Clinical Appropriateness Guidelines* (cont.)

### Oncologic imaging updates

- **MRI breast:**
  - New indication for breast implant associated anaplastic large cell lymphoma
  - New indication for pathologic nipple discharge
  - Further define the population of patients most likely to benefit from preoperative MRI
- **Breast cancer screening:**
  - Added new high-risk genetic mutations appropriate for annual breast MRI screening
- **Lung cancer screening:**
  - Added asbestos-related lung disease as a risk factor

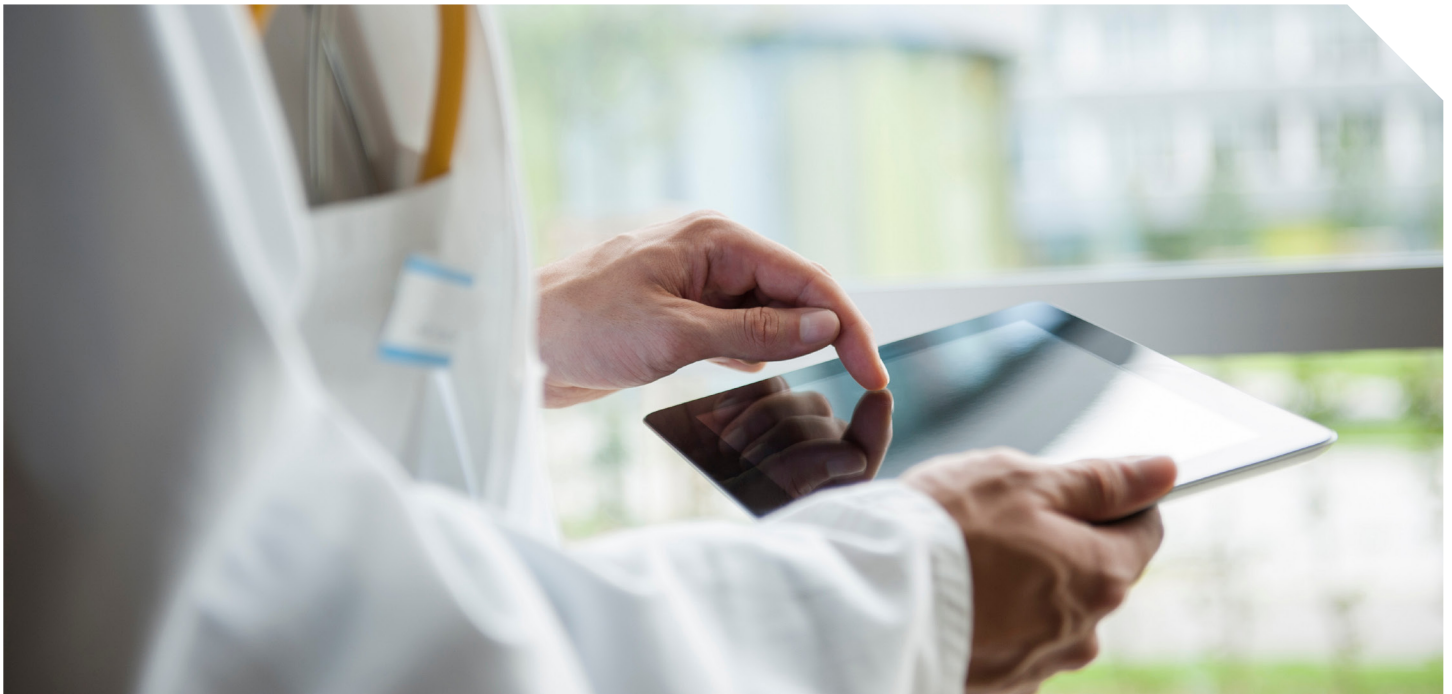
### As a reminder, ordering and servicing providers may submit prior authorization requests to AIM in one of several ways:

- Access AIM's **ProviderPortal**<sup>SM</sup> directly. Online access is available 24/7 to process orders in real time, and is the fastest and most convenient way to request authorization.
- Access AIM via the **Availity Portal**.\*
- Call the AIM Contact Center toll-free number at **1-800-714-0040** from 7 a.m. to 7 p.m.

If you have questions related to guidelines, please contact AIM via email at [aim.guidelines@aimspecialtyhealth.com](mailto:aim.guidelines@aimspecialtyhealth.com). Additionally, you can access and **download** a copy of the current and upcoming guidelines.

*\* AIM Specialty Health is an independent company providing some utilization review services on behalf of Healthy Blue. Availity, LLC is an independent company providing administrative support services on behalf of Healthy Blue.*

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## Healthy Blue Dual Advantage (HMO D-SNP) 2021 updates

### 2021 Healthy Blue Dual Advantage service area expansion:


Healthy Blue Dual Advantage (HMO D-SNP) expanded its service area in 2021. Healthy Blue Dual Advantage is available in all Louisiana parishes with the exception of Concordia, East Carroll, Iberia, Lincoln, Madison, Tangipahoa, Webster and West Carroll parishes.

If you are interested in participating with our network, please contact Network Development department by emailing Healthy Blue at [shana.jones@healthyblue.com](mailto:shana.jones@healthyblue.com) or by calling **1-800-716-2299, option 1.**

### 2021 Healthy Blue Dual Advantage benefit updates:

An overview of notable 2021 benefit changes will be available at [2020 D-SNP News and Announcements](#).

Dual Advantage  
October 2020



### Louisiana 2021 Dual Advantage plan changes

**Annual benefit changes for Medicare Advantage plan members under Healthy Blue will be effective January 1, 2021.**

The following is a summary of these changes. Complete details are in the member's Evidence of Coverage. Please visit <https://providers.healthyblue.com> and select **Healthy Blue Dual Advantage D-SNP**. Then, select **2020 Evidence of Coverage under D-SNP Benefits for Evidence of Coverage**, formularies and benefit summaries, or contact Provider Services at the number on the back of the member's ID card. Changes may include medical and Part D benefits, copays, coinsurance, deductibles, formulary coverage, pharmacy network, premiums and out-of-pocket maximums.

Some group-sponsored Medicare Advantage plan benefits vary from the Medicare Advantage plans offered to individuals. Please refer to the member's evidence of coverage or call Provider Services at the number on the member ID card for more benefit detail.

**2021 highlights:**  
Not all benefits listed below are available to all Medicare Advantage members. Complete details are in the member's Evidence of Coverage.

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## Transition to AIM Specialty Health *Rehabilitative Services Clinical Appropriateness Guidelines*

Effective January 1, 2021, Healthy Blue will transition the clinical criteria for medical necessity review of certain outpatient rehabilitative services from our clinical guidelines for physical therapy CG-REHAB-04, occupational therapy CG-REHAB-05 and speech language pathology CG-REHAB-06 to AIM Specialty Health<sup>®</sup> *Rehabilitative Service Clinical Appropriateness Guidelines*. These reviews will continue to be completed by the Healthy Blue Utilization Management team.



Access and [download](#) a copy of the current and upcoming guidelines.\*

\* AIM Specialty Health is an independent company providing some utilization review services on behalf of Healthy Blue.

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# SNF admission reporting requirements for D-SNP plans



Dual Eligible Special Needs Plans (D-SNPs) are Medicare Advantage plans that enroll Medicare beneficiaries who also have Medicaid coverage. To be approved by CMS, a D-SNP must enter into an agreement with a state's Medicaid agency.

## Why is this change necessary?

In an effort to address greater coordination between D-SNPs and state Medicaid agencies, Congress mandated more specific care coordination requirements for D-SNPs in the *Bipartisan Budget Act (BBA) of 2018*, and CMS adopted rules that take effect on January 1, 2021.\* In its guidance to states, CMS indicates that D-SNPs must have:

*"...a contract with the state that specifies a process for notifying the state, or the state's designee(s), of hospital or skilled nursing facility (SNF) admissions for at least one designated group of high-risk individuals, for the purpose of care coordination of Medicare and Medicaid covered services during a transition of care. The state Medicaid agency must establish the timeframes and method(s) by which notice is provided."*

## What is the impact of this change?

As a result, all of the D-SNP contracts under Healthy Blue have been updated to include Admission, Discharge, and Transfer (ADT) notification requirements for both hospitals and skilled nursing facilities (SNFs) in our 2021 D-SNP contracts. These ADT notifications will be required within 24 hours of occurrence and must be shared with the state's Medicaid agency and/or member's Medicaid MCO.

To assist in timely notification and improved coordination, please promptly notify Healthy Blue upon awareness of admission beginning January 1, 2021. Please note, this reporting requirement does not impact your claim submission or processing.

\* See CMS Informational Bulletin: *Medicare-Medicaid Integration and Unified Appeals and Grievance Requirements for State Medicaid Agency Contracts with Medicare Advantage Dual Eligible Special Needs Plans (D-SNPs) for Contract Year 2021*. <https://www.medicaid.gov/federal-policy-guidance/downloads/cib111419-2.pdf>

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## Medical Policies and Clinical Utilization Management Guidelines update

The *Medical Policies, Clinical Utilization Management (UM) Guidelines* and *Third-Party Criteria* below were developed and/or revised to support clinical coding edits. Note, several policies and guidelines were revised to provide clarification only and are not included. Existing precertification requirements have not changed.

To view a guideline, visit <https://provider.healthybluelouisiana.com/louisiana-provider/medical-policies-and-clinical-guidelines>.

### Updates

Updates marked with an asterisk (\*) denote that the criteria may be perceived as more restrictive:

- CG-DME-46 — Pneumatic Compression Devices for Prevention of Deep Vein Thrombosis of the Extremities in the Home Setting
  - Expanded scope of document and revised Medically Necessary statement
- CG-DME-47 — Noninvasive Home Ventilator Therapy for Respiratory Failure
  - Revised Medically Necessary and Discussion/General Information sections
- CG-GENE-02 — Analysis of RAS Status
  - Clarified scope of document and revised the Not Medically Necessary and Coding sections
- CG-MED-64 — Transcatheter Ablation of Arrhythmogenic Foci in the Pulmonary Veins as a Treatment of Atrial Fibrillation or Atrial Flutter (Radiofrequency and Cryoablation)
  - Revised the Medically Necessary statement
- CG-MED-68 — Therapeutic Apheresis
  - Revised Medically Necessary, Not Medically Necessary, Coding and Discussion/General Information sections
- DME.00011 — Electrical Stimulation as a Treatment for Pain and Other Conditions: Surface and Percutaneous Devices
  - Revised Investigational and Not Medically Necessary, Rationale and Coding sections
  - MED.00004 — Technologies for the Evaluation of Skin Lesions (including Dermatoscopy, Epiluminescence Microscopy, Videomicroscopy, Ultrasonography)
    - Revised the Not Medically Necessary, Rationale and Coding sections

### Medical Policies

On November 7, 2019, February 20, 2020 and May 14, 2020, the Medical Policy and Technology Assessment Committee (MPTAC) approved several *Medical Policies* applicable to Healthy Blue.

### Clinical UM Guidelines

On November 7, 2019, February 20, 2020 and May 14, 2020, the MPTAC approved several *Clinical UM Guidelines* applicable to Healthy Blue. These guidelines were adopted by the medical operations committee for Healthy Blue members on November 28, 2019, April 23, 2020 and May 25, 2020.



Read more online.

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