

A BI-MONTHLY PUBLICATION FOR MVP-PARTICIPATING HEALTH CARE PROVIDERS

Vermont

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MVP Provider Directory

You can search the current MVP Provider Network at www.mvphealthcare.com. Select *Find a Doctor* to search for current primary care providers and specialists online.



UN-CASHED CHECKS?

Visit longlostmoney.com to see if MVP has any un-cashed checks in your name or in the name of your business.

Contacting MVP Professional Relations

MVP Corporate Headquarters Vermont 1-888-363-9485 1-800-380-3530

Denise V. Gonick
President & CEO

We welcome your comments.

Healthy Practices
MVP Health Care, Inc.
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www.mvphealthcare.com

PROFESSIONAL RELATIONS UPDATES

MVP Health Care Appoints New Chief Medical Officer

MVP Health Care has named Elizabeth (Beth) Malko, M.D. as its new chief medical officer. Dr. Malko succeeds Allen Hinkle, M.D., who announced earlier this year that he would be leaving MVP.

Dr. Malko has more than 20 years of managed care experience, bringing her medical expertise to both for-profit and not-for-profit payor settings. She comes to MVP from a position as executive vice president for clinical transformation and operations at Evolent Health in Arlington, Va. Evolent was founded in 2011 by The Advisory Board to help progressive health care systems lead, build, and own the path to value-based care.

She has extensive management experience, including leadership of engineers, physicians, pharmacists, nurses, and administrative and managed care staff. She led a staff of more than 350 associates at Evolent in clinical strategy and relationships. Previously, Dr. Malko served as the executive vice president and chief medical officer for Fallon Community Health Plan in Worcester, Mass.; as the regional medical director for WellPoint Inc.'s state-sponsored business; and as a lead medical director for Anthem BCBS in New Hampshire and Connecticut. Earlier in her career, she also served as a family physician in private practice and as a chief engineer in several environmental engineering firms.

(Continued on page 2)

MVP Vermont Office Moves

MVP Health Care has moved its Vermont office to **62 Merchants Row in Williston.**

The move is part of a larger company-wide effort to improve consumer access for individual purchasers of health insurance products. The new office is more convenient and visible for walk-in traffic and has space for MVP to hold member meetings on-site. Currently, the MVP office is located at 66 Knight Lane in Williston.

Ensuring the best member experience possible is an important goal for MVP, and having a convenient and accessible location is part of that experience. The new Merchants Row location is more appropriately sized for our needs and that of our members, is in the middle of a busy retail area where people are already going about their daily activities, and has plenty of parking, including indoor bike parking.

“Dr. Malko brings great talent and experience to MVP and I am confident that she will play a significant role in our ongoing transformation as we meet and manage the challenges presented by an ever-changing industry,” said MVP President and CEO Denise Gonick.

Dr. Malko earned a B.S. degree in biology and a master’s degree in engineering and environmental engineering from Rensselaer Polytechnic Institute. Her M.D. was awarded by the University of Connecticut. She was board certified in family practice and is an active fellow of the American Academy of Family Practice.

Smoking Cessation— An Intervention Whose Time Is Here

Recent data has shown a reduction in tobacco smoking over the past several years. However, many of your patients, including teenagers, continue to smoke. Helping them to quit may be the most important thing you can do for them. Medical literature clearly supports the importance of physician intervention in getting patients to quit and new programs are available to assist in accomplishing this goal.

There are many barriers to getting a smoker to quit. One problem is that many of the ads and brochures focus on complications of smoking that will not occur until later in life. Teenagers and twenty-somethings are notorious for their sense of invincibility and a lack of concern for what may happen in the far future. It is important when communicating with them to point out the more immediate effects that may impact them sooner. This includes the effects of smoking on appearance, such as stained teeth and yellow fingers, and increased susceptibility to infections, such as pneumonia. It also increases the risk of Type 2 diabetes and may lead to an increased rate of progression in individuals with Type 2 diabetes.

Another factor that may catch the attention of younger smokers is the effect of vasoconstriction on sexual function and fertility. Smoking contributes to the rise of impotence in men and to reduced responsiveness and achievement of orgasm in both men and women. In addition, it may contribute to infertility in women and can increase the risk of preterm birth, birth defects, and low birth weight during pregnancy and the risk of otitis, respiratory infections and Sudden Infant Death Syndrome (SIDS) in newborns and infants.

The longer term effects, which may bear mentioning, include increased risk of lung disease, heart disease and stroke as well as many types of cancers, including

lung, throat, head and neck, colorectal, cervical, blood, pancreas, and kidney. If the risk of lung cancer is not enough to get their attention, maybe the long list of cancers will. It may also help to mention that the risk of dying is three times higher in smokers.

Advise your patients that free support is available by phone or online from the New York State Smokers’ Quitline at **1-866-NY-QUITS** (1-866-697-8487), or **www.nysmokefree.com**. MVP Health Care wants to help you to keep your patients healthy.

MVP Survey Appreciation Award Winners

The following Provider Offices are the winners of the four \$50 VISA cards winners from the Provider Utilization Management survey:

Pre-Emption Family Medicine	Penn Yan, NY
HRHCare	Hudson, NY
St. Peter’s Sleep Center	Albany, NY
Jacques Piche, MD	Plattsburgh, NY

Home and Community Based Services (HCBS)

As of October 1, 2016, MVP will begin offering the following Home and Community Based Services to eligible MVP Harmonious Health Care Plan members:

Psychosocial Rehabilitation Services

Psychosocial Rehabilitation (PSR) services are designed to assist the individual with compensating for or eliminating functional deficits and interpersonal and/or environmental barriers associated with their behavioral health condition (i.e., substance use disorder and/or mental health).

Community Psychiatric Support and Treatment

Community Psychiatric Support and Treatment (CPST) includes time-limited, goal directed supports and solution-focused interventions intended to achieve identified person-centered goals or objectives as set forth in the individual’s Plan of Care and CPST Individual Recovery Plan.

Empowerment Services—Peer Supports

Peer Support services are peer-delivered services with a rehabilitation and recovery focus designed to promote skills for coping with and managing behavioral health symptoms.

Habilitation

Habilitation services are typically provided on a one-on-one basis and are designed to assist participants with a behavioral health diagnosis in acquiring, retaining, and improving skills such as communication, self-help, domestic, self-care,

socialization, fine and gross motor skills, mobility, personal adjustment, relationship development, use of community resources, and adaptive skills necessary to reside successfully in home and community based settings.

Respite

Short-term crisis respite is a short-term care and intervention strategy for individuals who have a mental health or co-occurring diagnosis and are experiencing challenges in daily life.

Intensive crisis respite is a short-term, residential care, and clinical intervention strategy for individuals who are facing a behavioral health crisis, including individuals who are suicidal, express homicidal ideation, or have a mental health or co-occurring diagnosis and are experiencing acute escalation of mental health symptoms.

Family Support and Training

Training and support necessary to facilitate engagement and active participation of the family in the treatment planning process, and with the ongoing implementation and reinforcement of skills learned throughout the treatment process.

Non-Medical Transportation Services

Non-medical transportation services are offered, in addition to any medical transportation furnished under the 42 CFR 440.17(a) in the State Plan.

Individual Employment Support Services

Individual employment support services are individualized, person-centered services providing supports to participants who need ongoing support to learn a new job and maintain a job in a competitive employment or self employment arrangement.

Education Support Services

Education support services are provided to assist individuals with mental health or substance use disorders who want to start or return to school or formal training with a goal of achieving skills necessary to obtain employment.

For additional information about these services, visit www.omh.ny.gov and select *Consumers & Families*, then *Behavioral Health Managed Care*, then *Managed Care Updates*, then *Overview*, and then *Health and Recovery Plans (HARP)*.

Introducing Our New Notification System Focusing on Authorizations

MVP Health Care is announcing the launch of our new online notification system on the MVP Provider Portal. If you elect, you will begin to receive an email

notification for the following types of authorization letters:

- Approval letters
- Request for information letters
- Partial approval letters
- Denial letters

MVP will provide more information about this new program soon, including contact and resource information that will advise as to how you can start accessing this new online feature, on and after September 9, 2016.

Online Provider Demographic Information Review Request

The Centers for Medicare and Medicaid Services (CMS) regulation 42 CFR 422.111(b)(3) and (h)(2)(ii), 422.112, 423.128(d)(2) requires that all health plans work with their provider network on a quarterly basis to confirm the provider demographic information in the online directory is accurate. Providers are required to review their demographic information in the MVP directory and notify MVP of any inaccuracies in the directory to be updated.

MVP is asking all participating providers to follow these steps:

Step 1: Visit www.mvphealthcare.com and select *Find a Doctor*, then *Search by Provider*.

Step 2: Search for the provider(s) in your practice and review the following demographic information for accuracy:

- Ability to accept new patients
- Street address or missing addresses
- Phone number
- Other changes that affect availability to patients. (e.g. handicap accessible, specialty changes)

Step 3: If demographic information is identified as incorrect, please submit the correct information to MVP using the *MVP Providers Change of Information* form. To download this form, visit www.mvphealthcare.com and select *Providers*, then *Forms*. Delegated providers should contact their delegate administrator to update demographic information.

Step 4: If the update applies to multiple providers in the group, please include a roster of all providers to whom the change applies, including the providers name and NPI, when you submit updates to MVP.

Step 5: Fax or email the completed *Providers Change of Information* form to the appropriate regional fax or email address listed on the form.

Step 6: *Login* at www.caqh.com and make any demographic updates to your Council for Affordable Quality Healthcare (CAQH) profile so it matches the information you are submitting to MVP and re-attest your CAQH.

Annual Notice

Following is an annual notice from the New York State Department of Financial Services (DFS). The DFS recommends that providers print and post this notice in their office. A poster version of this notice (PDF) is available for download in English and Spanish. Visit www.mvphealthcare.com and select *Privacy & Compliance* at the bottom of the homepage.

Confidentiality Protocols for Domestic Violence Victims and Endangered Victims

From the New York State Department of Financial Services Insurance Law Section 2612 and Insurance Regulation 168, effective January 1, 2013.

Applies to: Members of health plans offered by the following MVP operating subsidiaries; MVP Health Plan, Inc. (except for Medicare Advantage products), MVP Health Services Corp., MVP Health Insurance Company, and Preferred Assurance Company, Inc.

Summary: Insurance Law § 2612 states that if any person covered by an insurance policy issued to another person who is the policyholder or if any person covered under a group policy delivers to the insurer that issued the policy, a valid order of protection against the policyholder or other person, then the insurer is prohibited for the duration of the order from disclosing to the policyholder or other person the address and telephone number of the insured, or of any person or entity providing covered services to the insured. The regulation governs confidentiality protocols for domestic violence victims and endangered individuals.

To make a request: A requestor should contact MVP's Customer Care Center at the address or telephone number indicated on the contact information at the end of this notice.

The requestor must provide MVP's Customer Care Center with an alternative address, phone number, or other method of contact and may be required to provide MVP's Customer Care Center with a valid order of protection.

To revoke a request: A requestor should submit a sworn statement to the address indicated on the contact information at the end of this notice.

New York State Domestic Violence and Sexual Violence Hotline

1-800-942-6906

MVP's Customer Care Center

MVP Customer Care Center

625 State Street

Schenectady, NY 12301

1-888-687-6277 (TTY 1-800-662-1220)

MEDICAL POLICY UPDATES

The MVP Quality Improvement Committee (QIC) approved the policies summarized below during the June meeting. Some of the medical policies may reflect new technology while others clarify existing benefits. *Healthy Practices* and/or *FastFax* will continue to inform your office about new and updated medical policies. MVP encourages your office to look at all of the revisions and updates on a regular basis in the *Benefit Interpretation Manual* (BIM) located on www.mvphealthcare.com. To access the BIM, log in to your account and select *Online Resources*, then *BIM* under *Policies*. The *Current Updates* page of the *BIM* lists all medical policy updates. If you have questions regarding the medical policies, or wish to obtain a paper copy of a policy, contact your Professional Relations representative.

Medical Policy Updates Effective October 1, 2016

Burn Garments and Lymphedema Sleeves: There are no changes to the medical policy criteria.

Dental Care Services Prophylactic Dental Extractions: There are no changes to the medical policy criteria.

Hyaluronic Acid Derivatives: Previously the medical policy listed a Medicare variation. The Medicare variation has been removed. The Medicare Local Coverage Determination (LCD) has been archived. Coverage for Medicare products will now follow the MVP Hyaluronic Acid Derivatives medical policy criteria.

Oxygen and Oxygen Equipment: There are no changes to the medical policy criteria.

Prophylactic Mastectomy and Oophorectomy: There are no changes to the medical policy criteria.

Robotic and Computer Assisted Surgery: There are no changes to the medical policy criteria.

Tear Osmolarity Testing for Dry Eye Disease Point of Care: The medical policy is updated to state the tear osmolality system in the office setting is considered medically necessary when used to determine the severity of clinically significant dry eye disease. Tear osmolarity must be performed by an ophthalmologist. Previously, tear osmolarity testing in the office setting was considered not medically necessary and therefore not covered.

Ventricular Reduction Surgery: There are no changes to the medical policy criteria.

Medical Policy Updates Effective January 1, 2017

Habilitation Services for Individual and Small Group Products *NEW*: Habilitation Services is a new policy only for individual and small group products, effective January 1, 2017. The policy outlines criteria for both inpatient and outpatient settings. Criteria for inpatient habilitation services follow the same criteria that are used for acute inpatient rehabilitation admission in regards to requirements and number of days. The second set of criteria are for services in a Skilled Nursing Facility and must also meet Skilled Nursing Facility admission criteria. Outpatient section must meet requirements documented in both medical records requirement section and habilitation services section of the medical policy.

Medical Policies for approval without changes in July 2016:

- Artificial Intervertebral Discs, Cervical and Lumbar
- Autism Spectrum Disorders NH
- Breast Reduction Surgery (Reduction Mammoplasty)
- Endoscopy (Colonoscopy)
- Endovascular Repair of Aortic Aneurysm
- Endovenous Ablation of Varicose Veins
- Laser Treatment of Port Wine Stains
- Low Vision Aids
- Oxygen Therapy for Treatment of Cluster Headaches
- Personal Care and Consumer Directed Services
- Umbilical Cord Blood Banking

In-Office Procedure List Update

The MVP In-Office Procedure List has been reviewed, updated, and is effective January 1, 2017. The

In-Office Procedure List is comprised of procedures that are limited to the physician's office place of service (POS). Any planned procedures on this list performed outside of the physician office at POS 22 or 24 will be denied unless prior authorized. All lines of business require prior authorization for site of service.

Participating providers are required to comply with MVP's protocols according to their participating provider agreements and a review of procedures on this In-Office Procedure List and enforcement of this POS policy is part of MVP's protocols. Since this is a POS review, there are no appeal rights. Please refer to the Place of Service Payment Policy, Split Billing Payment Policy in Section 15, Payment Policies, of the Provider Resource Manual for details on billing correct place of service. To access the In-Office Procedure List and the Provider Resource Manual, visit www.mvphealthcare.com, select *Providers* and then *Log In* using your MVP username and password. Select the gray box to access your profile and choose *Online Resources* on the left hand side of the page.

Case and Condition Health Management Programs Accepting Referrals

MVP offers dedicated Population Health Management programs to members at a variety of service levels. Drawing on the combined strength of our wellness strategists, registered nurses, social workers, respiratory therapists, physicians, pharmacists, and community health care providers, MVP offers a highly focused, integrated approach to management that promotes quality, cost-effective health care throughout the care continuum. MVP Case Managers utilize key principles within the framework of nursing case management established by the American Nursing Association and the Case Management Society of America.

MVP's Condition Health Management program focuses on members with:

- Asthma
- Low back pain
- Cardiac condition (post-event based)
- COPD
- Diabetes
- Heart failure

MVP's Acute Case Management Focuses on High-Risk Target Populations

Factors considered for identifying eligible members for case management include: diagnosis,

cost, utilization (emergency room and inpatient admissions) and qualitative variables (social risk, support network), as well as members' willingness to participate in case management.

Case management activities also include care of members who undergo organ transplant, have cancer, end stage renal disease, HIV/AIDS, or experience a high-risk pregnancy. Additional factors for consideration when determining member eligibility include members who are non-adherent to the plan of care and/or members who require additional guidance in navigating the health care continuum. Members who experience a critical event or diagnosis can be referred for case management services through multiple avenues.

To make a referral to our Population Health Management program, call **1-866-942-7966**, fax **1-866-942-7785**, or email phtmreferrals@mvphealthcare.com.

CARING FOR THE ELDERLY

Improving Bone Health

Bone health and fall risk are important topics to discuss with your older adult patients. Talk to your patients about proper screenings and small lifestyle changes to develop a plan that meets their individual needs. MVP offers many resources to help assess and improve a patient's bone health.

The Fracture Risk Assessment (FRAX) tool is a useful resource to evaluate a patient's fracture risk. The calculations provided are based on patient models that incorporate risk factors and bone mineral density measurements. To access the FRAX tool, visit www.shef.ac.uk/FRAX.

Physical activity is important to improve strength and balance. The MVP Medicare Community Health Promotion team offers physical activity programs throughout the communities we serve. To view upcoming class schedules, visit www.mvphealthcare.com and select *Members*, then *Live Healthy*, and then *Health Promotion Activities*.

The SilverSneakers® Fitness program is also part of most MVP Medicare Advantage plans. Designed exclusively for Medicare-eligible adults, SilverSneakers offers a gym membership and exercise classes at thousands of locations across the country. For more information, visit

www.silversneakers.com. Talk with your patients about the level of activity that's right for them.

PHARMACY UPDATES

Pharmacy Policy Updates Effective October 1, 2016

Arthritis, Inflammatory Biologic Drug Therapy

- Cosentyx added to policy

Cialis for BPH

- Enablex, Vesicare, and Toviaz added to list of examples of anticholinergics drugs

Epinephrine Auto-injector

- Auvi-Q removed from policy

Gout Treatment

- Mitigare added to policy
- Liver function test values and failure of probenecid removed from criteria

Juxtapid/Kynamro

- Policy archived

Methotrexate Auto-injector

- Otrexup 7.5mg and 17.5mg added to policy

Migraine Agents

- Added prior authorization and quantity limits to dihydroergotamine ampules
- Added prior authorization to Migranal Nasal spray (brand and generic)

Pain Medications

- Belbuca added to policy with a quantity limit of 60 films per 30 days
- Hysingla ER added to policy with a step edit and quantity limit of 30 tablets per 30 days
- Zohydro ER changed from prior authorization to step edit

Pulmonary Hypertension (Advanced Agents)

- Veletri added to policy

Orphan Drug(s) and Biologicals

- Cholbam, Juxtapid, Kynamro, Strensiq and Syprine added to policy

Formulary Updates for Commercial, Medicaid, and Marketplace Formularies

New Drugs (recently FDA approved, prior authorization required, Tier 3, non-formulary for MVP Medicaid)

Drug Name	Indication
Cabometyx tablets	Advanced cell renal carcinoma
Nuplazid tablets	Hallucinations and delusions associated with Parkinson's
Briviact tablets	Partial-onset seizures
Tecentriq injection	Urothelial carcinoma
Orfadin capsules	Hereditary tyrosinemia type 1
Ocaliva tablets	Primary biliary cholangitis
Onzetra powder	Migraines
Xtampza ER capsules	Pain
Cetylev tablets	Acetaminophen overdose
Probuphine implant	Opioid dependence

Drugs Added to Formulary (Tier 1 for Commercial/Medicaid and Tier 2 for Marketplace)

rosuvastatin
armodafinil
dofetilide
doxycycline DR 200mg-PA required
alogliptan/metformin-PA required
Alogliptan/pioglitazone-PA required

Drugs Removed from Prior Authorization

Praxbind injection
Belbuca films
Imlygic injection
Yondelis injection
Tagrisso tablets
Ninlaro capsules
Tresiba injection



PO Box 2207
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to enroll in MVP e-communications.

