

**May 2021**

# PROVIDER NEWSLETTER

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Want to receive the *Provider Newsletter* via email?  
Click [here](#) to provide/update your email address.



## COVID-19 information

UniCare Health Plan of West Virginia, Inc. is closely monitoring COVID-19 developments and how the novel coronavirus will impact our customers and provider partners. Our clinical team is actively monitoring external queries and reports from the Centers for Disease Control and Prevention (CDC) to help us determine what action is necessary on our part.

For additional information, reference the *COVID-19 information* section of our [website](#).

UWVPEC-1383-20

## Continuing medical education/Continuing education unit opportunities

We offer webinars on a variety of topics, including medical coding, claims issues, quality measures, healthcare and more. Each live webinar may offer both continuing medical education (CME)/ continuing education unit (CEU) credit for attendees. On-demand recordings are also available (with CME credit) for your convenience.

Sign up for a session [here](#) today!

UWV-NL-0900-21

## Sign up to receive updates via email from UniCare Health Plan of West Virginia, Inc. (UniCare)

In order to communicate more efficiently with providers, UniCare is now sending some bulletins, policy change notifications, prior authorization update information, educational opportunities and more to providers via email. Email is the quickest and most direct way to receive important information from UniCare.

### What do we need from you?

To receive email from UniCare (including some sent in lieu of fax or mail), update your email address via the *Provider Maintenance Form* located on the provider site: <https://provider.unicare.com> > Forms > *Provider Maintenance Form*.

### What if I need assistance?

If you have questions about this communication, email Provider Services at [wvnetworkrelations@anthem.com](mailto:wvnetworkrelations@anthem.com) and an associate will respond to your inquiry.

UWV-NL-0330-20

# Metabolic monitoring and diabetes screening measures for those on antipsychotic medications

## Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM)

The Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM) HEDIS® measure evaluates the percentage of children and adolescents 1 to 17 years of age who had two or more antipsychotic prescriptions and had metabolic testing.

Antipsychotic medications can increase a child's risk for developing health concerns, including metabolic health complications. The goal of this measure is for members to have metabolic monitoring by having both a blood glucose test (glucose or HbA1c) and LDL-C testing annually.

### Record your efforts:

- Glucose test or HbA1c test and LDL-C cholesterol test as identified by claim/encounter
- Document results in the member's medical record

## Diabetes Screening for People with Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD)

The Diabetes Screening for People with Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD) HEDIS measure evaluates members 18 to 64 years of age with schizophrenia, schizoaffective disorder or bipolar disorder, and who were dispensed an antipsychotic medication and had a diabetic screening test during the measurement year.

Diabetes screening is important for anyone with schizophrenia or bipolar disorder. The added risk associated with antipsychotic medications contributes to the need to screen people with schizophrenia for diabetes annually.

### Record your efforts:

- Glucose test or HbA1c test as identified by claim/encounter
- Document results in the member's medical record

### Helpful tips:

- Educate patients and their caregivers on the importance of completing blood work annually.
- If your practice uses electronic medical records (EMRs), have flags or reminders set in the system to alert when a patient is due for screenings.
- Draw labs in your office, if available, or refer members to a participating lab for screenings.
- Follow up on laboratory test results and document in your chart.
- Share EMR data with UniCare Health Plan of West Virginia, Inc. (UniCare) to capture all coded elements.

### Other available resources:

- *Clinical Practice Guidelines* are available on our [provider website](#).
- For *The Quality Measures Desktop Reference for Medicaid Providers and HEDIS Benchmarks and Coding Guidelines for Quality Care*, contact our Customer Care Center.

*HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA).*

UWV-NL-0372-21

# Medical Policies and Clinical Utilization Management Guidelines update — effective date correction

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://www.unicare.com/provider/policies/clinical-guidelines/updates>.

## Notes/updates:

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

- \*GENE.00055 – Gene Expression Profiling for Risk Stratification of Inflammatory Bowel Disease (IBD) Severity
  - Gene expression profiling for risk stratification of inflammatory bowel disease (IBD) severity, including use of PredictSURE IBD, is considered investigational and not medically necessary for all indications
- \*LAB.00037 – Serologic Testing for Biomarkers of Irritable Bowel Syndrome (IBS)
  - Serological testing for biomarkers of irritable bowel syndrome (for example, CdtB and anti-vinculin), using tests such as, IBSDetex, ibs-smart or IBSchek, is considered investigational and not medically necessary for screening, diagnosis or management of irritable bowel syndrome, and for all other indications
- \*DME.00011 – Electrical Stimulation as a Treatment for Pain and Other Conditions: Surface and Percutaneous Devices
  - Revised scope to only include non-implantable devices and moved content addressing implantable devices to SURG.00158
- Added “non-implantable” to bullet point on percutaneous neuromodulation therapy
  - Added percutaneous electrical nerve field stimulation (PENFS) as investigational and not medically necessary for all indications
- \*SURG.00062 – Vein Embolization as a Treatment for Pelvic Congestion Syndrome and Varicocele
  - Expanded scope to include percutaneous testicular vein embolization for varicocele and added embolization of the testicular (spermatic) veins as investigational and not medically necessary as a treatment of testicular varicocele
- \*CG-LAB-15 – Red Blood Cell Folic Acid Testing
  - RBC folic acid testing is considered not medically necessary in all cases
- \*CG-LAB-16 – Serum Amylase Testing
  - Serum amylase testing is considered not medically necessary for acute and chronic pancreatitis and all other conditions
- \*CG-GENE-04 – Molecular Marker Evaluation of Thyroid Nodules
  - Added the Afirma Xpression Atlas as not medically necessary
- SURG.00158 – Implantable Peripheral Nerve Stimulation Devices as a Treatment for Pain
  - A new Medical Policy was created from content contained in DME.00011.
  - There are no changes to the policy content
  - Publish date is December 16, 2020.
- CG-GENE-21 – Cell-Free Fetal DNA-Based Prenatal Testing
  - A new *Clinical Guideline* was created from content contained in GENE.00026.
  - There are no changes to the guideline content.
  - Publish date is December 16, 2020.

## **Medical Policies and Clinical Utilization Management Guidelines update (cont.)**

- The following AIM Specialty Health® **\*(AIM)\*\* Clinical Appropriateness Guidelines** have been revised and will be effective on April 12, 2021. To view AIM guidelines, visit the **AIM page**:
  - \*Imaging of the Chest
  - \*Imaging of the Head and Neck
  - \*Imaging of the Brain
  - \*Oncologic Imaging
  - \*Advanced Imaging of the Heart
  - \*Diagnostic Coronary Angiography

### **Medical Policies**

On November 5, 2020, the Medical Policy and Technology Assessment Committee (MPTAC) approved several *Medical Policies* applicable to UniCare Health Plan of West Virginia, Inc. (UniCare). These guidelines take effect April 12, 2021.

### **Clinical UM Guidelines**

On November 5, 2020, the MPTAC approved several *Clinical UM Guidelines* applicable to UniCare. These guidelines were adopted by the Medical Operations Committee for UniCare members on November 19, 2020. These guidelines take effect April 12, 2021.



**Read more online.**

**\*\* UniCare Health Plan of West Virginia, Inc. uses AIM Specialty Health clinical criteria when performing utilization reviews; AIM Specialty Health is a separate company.**

UWV-NL-0364-21



## **Quick Reference Guide — annual copay amount feature**

The annual copay amount feature on the Availity Portal\* is available to providers serving members enrolled in Mountain Health Trust under the Children's Health Insurance Program (CHIP). Providers can log into the secure portal to determine if a copay can be collected by seeing how much of the member's annual accumulator has been used and the remaining balance. By following the steps below, providers can determine if a copay is required at the time of service.



**Read more online.**

**\* Availity, LLC is an independent company providing administrative support services on behalf of UniCare Health Plan of West Virginia, Inc.**

UWVPEC-1872-21



An Anthem Company