

Provider Pulse

A Newsletter for our Provider Community

| Issue 1, 2021



Doula services now covered for members



As of **January 1, 2021**, we now cover a new member benefit, doula services. A doula is a trained professional who provides continuous physical, emotional and informational support throughout the perinatal period. The services include the following:

- Prenatal visits
- Labor and delivery support
- Postpartum visits

For more information, including the two levels of doula services, standard care and enhanced care, visit [Updates and Announcements](#).

Notice of Important Changes to Maternity Benefits

To view the recent updates to our member's maternity benefits, visit our [Mom's GEMS Program](#) webpage.



Follow-Up Care for Children Prescribed ADHD Medication

Horizon NJ Health is committed to supporting safe and appropriate prescription drug therapy for our members. We would like to remind providers that under the National Committee for Quality Assurance’s (NCQA) Healthcare Effectiveness Data and Information Set (HEDIS) guidelines, children ages 6 to 12 years newly prescribed attention-deficit/hyperactivity disorder (ADHD) medication must have one follow-up visit within 30 days of the initial dispense date. We encourage providers to schedule the follow up appointment **prior** to the patient leaving the office. The initial follow-up visit ensures the child is well and not suffering from adverse drug effects, and that a strategy for long-term management of his or her condition is in place.

If a follow-up visit has not occurred within 30 days of the dispensing date, we encourage you to contact the parent/guardian to schedule a visit as soon as possible. Should the member continue to require the medication, please ensure that two more follow-up visits occur within the next nine months after the initial 30-day period has ended. NCQA allows the prescribing practitioner or another practitioner involved in the member’s care to complete the follow-up visits. For helpful resources for pediatric practitioners, please visit the [Pediatric Psychiatry Collaborative through the NJ Chapter of the American Academy of Pediatrics website](#).

Member Rights & Responsibilities



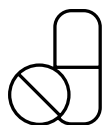
Members have rights, responsibilities and choices in the care they receive. Member rights and responsibilities are available in the Member Handbook, as well as through the links below:

- [Medicaid/NJ FamilyCare](#)
- [FIDE SNP](#)
- [Medicare Advantage](#)

Member rights and responsibilities are also located in Section 12 of the [Provider Administrative Manual](#) (for Medicaid/NJ FamilyCare and FIDE SNP).



Formulary changes



Changes were recently made to Horizon NJ Health’s pharmacy formulary. You can find the **drug formulary guide**, which includes an explanation and listing of step therapy, quantity/age limits, and drugs requiring prior authorization. Paper copies are available upon request. Here is a list of recent changes:

Covered Change Description	Brand (Generic) Drug Name	Alternatives (if applicable)
Formulary	Insulin Lispro Kwikpen 75/25	
Formulary	Focalin XR (dexamethylphenidate ER)	
Formulary	Onfi (clobazam) tablets	
Formulary	Otovel (ciprofloxacin/fluocinolone)	
Formulary	Jelmyto (mitomycin)	
Formulary	Koselugo (selumetinib)	
Formulary	Tabrecta (capmatinib)	
Formulary	Retevmo (selpercatinib)	
Formulary	Rhinocort Allergy (budesonide)	
Formulary	Lyrica Solution (pregabalin)	
Formulary	Lunesta (eszopiclone)	
Formulary	Ambien CR (zolpidem ER)	
Formulary	Rapaflo (silodosin)	
Formulary	Micardis (telmisartan)	
Formulary	Tricor 48mg (fenofibrate)	
Formulary	Avsola (infliximab-axxq)	
Formulary	Evrysdi (risdiplam)	
Formulary	Oriahnn (elagolix, estradiol, and norethindrone acetate)	
Formulary	Enspryng (satralizumab-mwge)	
Formulary	Dojolvi (triheptanoin)	
Non-Formulary	Cipro HC (ciprofloxacin/hydrocortisone)	generic Ciprodex
Non-Formulary	Cortisporin (neomycin/polymixin/ hydrocortisone) suspension	generic Cortisporin solution

Please note that Horizon NJ Health maximum days supply limit is 30 days. If, for medical reasons, members cannot be changed to preferred medications, you may call the Horizon NJ Health Pharmacy Department to request a prior authorization at **1-800-682-9094**.

New generics

Horizon NJ Health encourages using generic drugs before using Brand Name drugs when appropriate. Generic drugs are the same as brand name drugs in quality, strength, purity and stability, as required by the Food and Drug Administration. The following generic drugs are currently on the market or expected to be on the market within the next three months:

Generic Name	Brand Name
Lubiprostone	Amitiza



The flu and pneumococcal vaccines



It is important that your patients keep up with their vaccines. Please remind your patients to get their pneumococcal and influenza (flu) vaccines.

Pneumococcal vaccines

The Centers for Disease Control and Prevention (CDC) recommends pneumococcal vaccination for all children age 2 years old and younger, and all adults 65 years old and older.

- CDC recommends **PCV13** for:
 - All children younger than 2 years old
 - People age 2 years or older with certain medical conditions
 - Adults age 65 years or older also can discuss and decide, with their doctor, to get PCV13.
- CDC recommends **PPSV23** for:
 - All adults age 65 years or older
 - Those age 2 to 64 years with certain medical conditions
 - Adults age 19 to 64 years who smoke cigarettes

Flu vaccine

Please encourage your patients, 6 months of age and older, to get a flu vaccine every season.

Many individuals are confusing the flu with COVID-19. Although the flu and COVID-19 share many of the same symptoms, they are different from one another.

Similarities

- Fever or feeling feverish/chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue (tiredness)
- Sore throat
- Runny or stuffy nose
- Muscle pain or body aches
- Headache
- Some people may have vomiting and diarrhea, though this is more common in children than adults

Differences

- Flu viruses can cause mild to severe illness, including common symptoms listed above
- COVID-19 causes more serious illness in some people: possible change in or loss of taste or smell, diarrhea and chest pain

Sources: [CDC Influenza](#), [CDC Pneumococcal](#)

Clinical practice guidelines

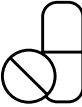
Clinical guidelines are located in Appendix A of the [Provider Administrative Manual](#) or and our [website](#).



COVID-19 updates and vaccine information

Stay up to date on all things COVID-19, including information on the COVID-19 vaccine, by visiting [COVID-19 Information](#).

HealthSphere



HealthSphere, our sophisticated, HIPAA-compliant, online health care data management and analytics tool, is available to all physicians, other health care professionals, ancillary providers and facilities to help make sure your patients get the right care.

HealthSphere merges and organizes clinical patient information collected from a variety of internal and external health care information systems and makes it available to users.

Register for [HealthSphere](#).

If you need additional support, email HealthSphere_Training@HorizonBlue.com.

Follow up with your patients after Emergency Room (ER) visit or inpatient hospitalization



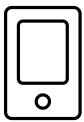
Early primary care engagement following an ER visit or an in-patient hospitalization has the potential to prevent unnecessary spending, improve coordinated care and health outcomes, and reduce hospital readmissions. Patients with multiple complex chronic conditions, who account for a large percentage of readmissions among Medicaid and Medicare beneficiaries, may benefit more from timely follow-up with a Primary Care Physician (PCP).

Please remind your patients/caregivers to schedule a follow-up visit with you (the PCP) **within seven days after a hospital stay and within 30 days after an ER visit**.

Please note, telemedicine may be used for these follow-up visits, depending on the patient’s medical condition and access.



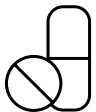
Electronic Visit Verification (EVV) now required



This 21st Century Cures Act mandate required the use of EVV for all Medicaid-funded, personal-care services by **January 1, 2021** and for all home-health services, such as Private Duty Nursing, by **January 1, 2023**. The State of New Jersey has announced a phased in approach to meeting the compliance standard.

For more information, visit [Updates & Announcements](#).

Help your epilepsy patients manage seizures



For people with living with epilepsy, high-quality primary care is essential in treating and managing seizures and comorbidities. Most patients go to their PCP for their day-to-day care and treatment. Only a small percentage of patients with new onset of epilepsy see a neurologist.

Please discuss with your patients a treatment plan for their epilepsy and encourage them to see a specialist, when appropriate.

You can find a complete list of covered seizure medications by reviewing our [formulary](#). For clinical guidance information, visit the [American Epilepsy Society](#).

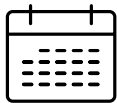
LogistiCare is now ModivCare



As of **January 6, 2021**, LogistiCare is officially ModivCare. This rebrand has no impact to your patients, our members. Members can still contact ModivCare, for rides to their appointments, by calling **1-866-527-9933** (TTY **1-866-288-3133**) or they can book a ride by visiting logisticare.com/members-families.



After hours coverage



It's important to ensure that your patients have timely access to quality medical care. Horizon NJ Health will review practices' after hours coverage through periodic on-site review of PCP's offices and/or "secret shopper" phone calls.

PCPs are randomly selected. You may be contacted after business hours or on weekends. You and your staff will be asked to identify the system the office uses for phone coverage after regular business hours.

Your response will be considered acceptable/unacceptable based on the following criteria:

Acceptable:

1. Phone is answered by a PCP, office staff, answering service or voice mail.
2. The answering service either:
 - a. Connects the caller directly to the PCP
 - b. Contacts the PCP on behalf of the caller and the provider returns the call
or
 - c. Provides a phone number where the PCP/covering provider can be reached

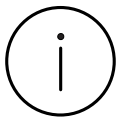
Unacceptable

1. The answering service:
 - a. Leaves a message for the provider on the PCP/covering provider's answering machine
or
 - b. Responds in an unprofessional manner
2. The provider's answering machine message:
 - a. Instructs the caller to go to the Emergency Room, regardless of the exigencies of the situation, for care without enabling the caller to speak with the provider for non-emergent situations
 - b. Instructs the caller to leave a message for the PCP
3. No answer
4. Listed number no longer in service
5. PCP is no longer participating in Horizon NJ Health's network
6. On hold for longer than five minutes
7. Answering service refuses to provide information for survey
8. Phone lines are persistently busy despite multiple attempts to contact the PCP

To see the complete list of standards, review Section 12:18 of the [Provider Administrative Manual](#).



Update your information – Keep your practice information updated



If you need instructions on how to update your information with us, all you have to do is send us a letter including the submitter's name and request type/supporting documentation. For the complete list of request types/supporting documents and where to send the letter, visit [Demographic updates](#).

Reminder: Reviewing charts for HEDIS measurement year 2020



Horizon NJ Health is committed to supporting the goals of the Healthcare Effectiveness Data and Information Set (HEDIS®), one of the most widely used tools for improving quality and measuring health care plan performance in the United States. We work with our participating providers to help ensure that the quality care and services provided to our members is appropriately documented.

To help us achieve our goal, we began our annual outreach efforts in February to collect medical record information pertaining to a variety of clinical indicators from HEDIS.

Our Quality Management Department is requesting copies of medical record documentation regarding your patients in accordance with the guidelines included in your Horizon NJ Health Agreement(s). Your prompt response is appreciated.

If you have any questions, email Mary Ann Hariton, HEDIS Manager, at Maryann_Hariton@HorizonBlue.com.

Thank you for your continued cooperation and for the high level of care you give your patients, our members.



Aspiration pneumonia



The source of bacteria that causes aspiration pneumonia can vary. Consider:

- Your patients' place of residence
- If they were recently hospitalized
- Their recent antibiotic use
- Whether their immune system is weakened

Please remind your patients to contact you or go to the ER if they are feeling the following symptoms:

- Chest pain
- Chills
- Fever
- Shortness of breath
- Wheezing

For more information on aspiration pneumonia, visit [Medline Plus](#).

Stay in network: Complete 21st Century Cures Act Application



To remain in the Horizon NJ Health network, providers are required to submit a completed 21st Century Cures Act Application to DXC Technology.

Providers who choose to serve only Medicaid Managed Care Organization (MCO) beneficiaries are referred to as 21st Century Cures registered or ROPA (referring, ordering, prescribing or attending) providers in the NJ FamilyCare Fee-for-Service (FFS) program.

How to register for 21st Century Cures Act

To download a 21st Century Cures Act Application, go to [njmmis.com](#), select Provider Enrollment Applications and then select 21st Century Cures Act Application as the Provider Type.

Providers under contract with multiple MCOs only need to submit one application.

Ancillary Contracting & Servicing Representatives

CONTACT	SPECIALTIES
<p>Alana McDonald 1-609-537-2438 Alana_McDonald@HorizonBlue.com</p>	<p>Adult Family Care¹ Adult Medical Day Care/Pediatric Medical Day Care Caregiver Participant Training¹ Chore Service (Cleaning/Maintenance)¹ Cognitive Therapy¹ Community Residential Services¹ Community Transition Services¹ Home-Delivered Meals¹ Medication Dispensing¹ Non-Medical Transportation¹ Personal Emergency Response System (PERS)¹ Radiology² Residential/Vehicle Modification¹ Social Adult Day¹ Traumatic Brain Injury (TBI)¹</p>
<p>Denice Berrios 1-609-537-2446 Denice_Berrios@HorizonBlue.com</p>	<p>Assisted Living Program¹ Assisted Living Residence¹ Comprehensive Personal Care Home¹ Comprehensive Outpatient Rehab Facility (CORF)² Laboratory² Skilled Nursing Facility¹ Sleep Studies² Sub Acute Rehab</p>
<p>Stephen Fitch 1-862-241-5996 Stephen_Fitch@HorizonBlue.com</p>	<p>Ambulatory Surgical Center (ASC) Lithotripsy² Behavioral Health (MLTSS/DDD/FIDE SNP) Electronic Visit Verification (EVV) Special Projects</p>
<p>Walgena Daniels 1-609-537-2335 Walgena_Daniels@HorizonBlue.com</p>	<p>Dialysis Durable Medical Equipment (DME) Hearing (Audiology) Home Infusion² Orthotic & Prosthetic (O&P) PT/OT/ST (outpatient)²</p>
<p>Lori Bemby 1-609-537-2427 Lori_Bemby@HorizonBlue.com</p>	<p>Ancillary Contracting Manager Home Health Home-Based Supportive Care¹ Personal Care Assistant (PCA) Private Duty Nursing Respite (In-Home)¹</p>

¹MLTSS Services

²Temporary coverage

Note: If you are a Behavioral Health Provider, please see page 12 for contact information.

Physician Relations Representatives

PROVIDER SERVICES: 1-800-682-9091

MAUREEN HANSON

(FQHC's North, Hunterdon, Somerset, Sussex, Warren)

1-609-537-2152

TORAH GRACE LAURENCE

(Burlington, Camden, Gloucester, Mercer)

1-609-718-9254

WILLIAM MITCHELL

(Middlesex, Monmouth, Ocean, Passaic, Union)

1-609-203-7094

CHERYL GILBERT SUPERVISOR

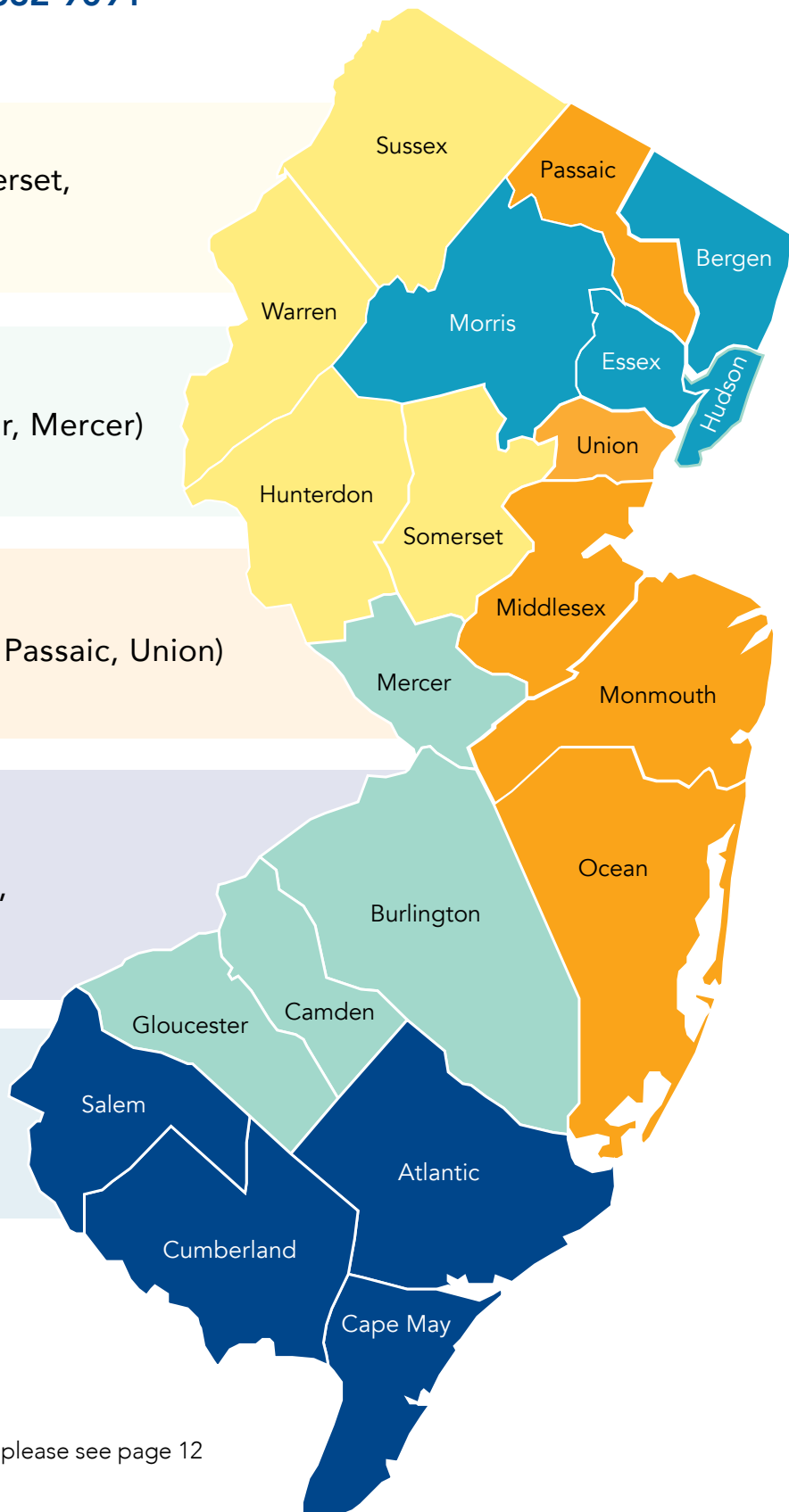
(Atlantic, Cape May, Cumberland, FQHC's South, Salem)

1-609-537-2634

ANGELICA MIRANDA

(Essex, Morris, Bergen, Hudson)

1-609-537-2336



Note: If you are a Behavioral Health Provider, please see page 12 for contact information.

Behavioral Health Representatives

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MICHELLE MCCUSKER

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Michelle_McCusker@HorizonBlue.com
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Dorothy_Laisi@HorizonBlue.com
1-856-638-3215

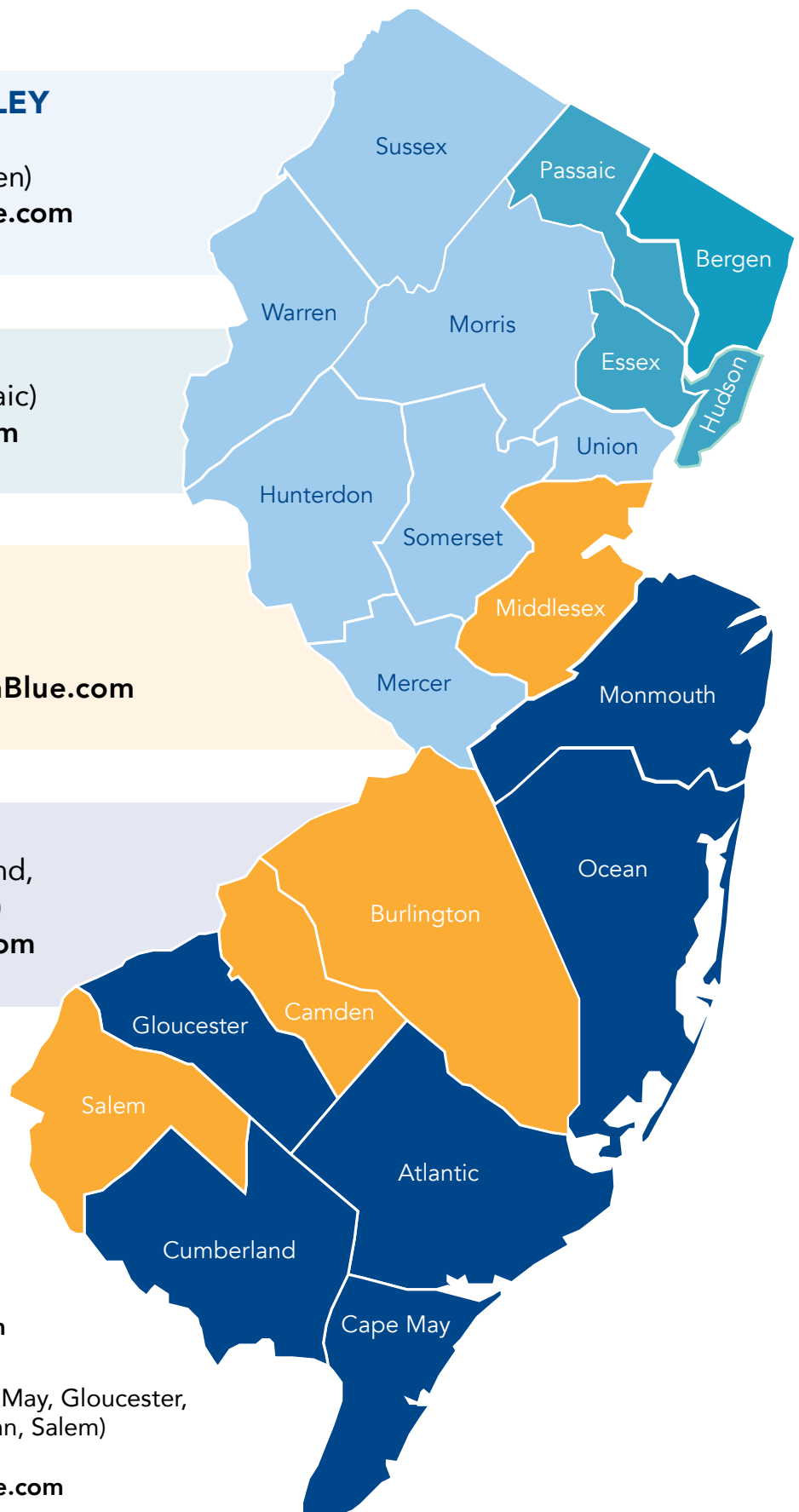
Ancillary Behavioral Health Representatives

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1-973-466-6824
Andrew_Alleman@HorizonBlue.com

BARBARA SLATER-WILSON

(Atlantic, Burlington, Camden, Cape May, Gloucester, Hunterdon, Mercer, Middlesex, Ocean, Salem)
1-973-466-4063
Barbara_Slater-Wilson@HorizonBlue.com



How to file a utilization management appeal



To request an appeal, you can call Provider Services at **1-800-682-9091**, weekdays, 8 a.m. to 5 p.m., Eastern Time, or Member Services at **1-800-682-9090 (TTY 711)** 24 hours a day, seven days a week.

If your appeal is requested by phone, you or the member will need to follow up by sending a written, signed letter confirming the appeal request. Written appeal requests should be mailed following the call to:

**Horizon NJ Health
Member/Provider Correspondence
PO Box 10196
Newark, NJ 07101-0406**

You can request an appeal up to 60 calendar days from the date on the initial adverse determination letter.

Stages	Timeframe for Member/ Provider to Request Appeal	Timeframe to Request Appeal with Continuation of Benefits for Existing Services	Timeframe for Appeal	FamilyCare Plan Type
<p>Internal Appeal</p> <p>The Internal Appeal is the first level of appeal, administered by the health plan. This level of appeal is a formal, internal review by health care professionals selected by the plan who have expertise appropriate to the case in question, and who were not involved in the original determination</p>	Within 60 calendar days from date on initial notification/ denial letter	<p>Members may request an appeal on or before the last day of the current authorization; or within ten calendar days of the date on the notification letter, whichever is later</p> <p>Providers may only request continuation of benefits with the member's written consent</p>	30 calendar days or less from health plan's receipt of the appeal request	A/ABP B C D
<p>External/IURO Appeal</p> <p>The External/IURO Appeal is an external appeal conducted by an Independent Utilization Review Organization (IURO)</p>	Within 60 calendar days from date on Internal Appeal notification letter	<p>Members may request an appeal on or before the last day of the current authorization; or within ten calendar days of the date on the Internal Appeal notification letter, whichever is later</p> <p>Providers may only request continuation of benefits with the member's written consent</p>	45 calendar days or less from IURO's decision to review the case	A/ABP B C D
<p>Medicaid Fair Hearing</p>	Within 120 calendar days from date on Internal Appeal notification letter	<p>Whichever is the latest of the following:</p> <ul style="list-style-type: none"> • On or before the last day of the current authorization; or • Within ten calendar days of the date on the Internal Appeal notification letter, or • Within ten calendar days of the date on the External/ IURO appeal decision notification letter 	A final decision will be reached within 90 calendar days of the Fair Hearing request	A/ABP only

For more information, review Section 10 of the [Provider Administrative Manual](#).

Horizon NJ Health is committed to the health care needs of our members. Please visit [our website](#) to learn more about our available programs.



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