MEDICAL MUTUAL®

2060 East Ninth Street
Cleveland, OH 44115-1355

Mutual News First Quarter, 2018

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Mutual News

Stay Informed with the Provider Manual

The Provider Manual is available at Provider.MedMutual.com under Tools and Resources. The Provider Manual is updated quarterly to include the latest policies, procedures and guidelines providers need to effectively work with Medical Mutual.

Contact Us

Visit **Provider.MedMutual.com** to log in to the Provider Portal.

If you have questions, please contact your provider contracting representative:

**Central/SE Ohio
(Columbus Office)**
(800) 235-4026

**NE Ohio/Pennsylvania
(Cleveland Office)**
(800) 625-2583

**NW Ohio/NE Indiana
(Toledo Office)**
(888) 258-3482

**SW Ohio/SE Indiana/Kentucky
(Cincinnati/Dayton Office)**
(800) 589-2583

Medical Policy Updates

Medical Policy Updates

The Corporate Medical Policies (CMPs) developed or revised from October 1, 2017 through December 31, 2017, and are outlined in the chart on the opposite page. CMPs are regularly reviewed, updated, added or withdrawn, and therefore are subject to change. For a complete list of CMPs, please visit Provider.MedMutual.com and select Tools & Resources, Care Management, Corporate Medical Policies.

For a list of services requiring prior approval or considered investigational, please consult the Providers, Tools & Resources, Care Management, Prior Approval & Investigational Services section of Medical Mutual's website.

Pharmacy		
Policy Number		**Title**

98006	●	Botox, Dysport, Myobloc, Xeomin
		  Onabotulinumtoxin A
		  Abobotulinumtoxin A
		  Rimabotulinumtoxin B
		  Incobotulinumtoxin A

98031-CC	●	Synagis (Palivizumab)
201616	●	Exondys 51 (Eteplirsen)
201013	●	Provenge (Sipuleucel-T)
201430-CC	●	Keytruda (Pembrolizumab)
201717	●	Faslodex (Fulvestrant)
201733	▲	Yescarta (Axicabtagene Ciloleucel)
200805	●	Enbrel (Etanercept)
201720-CC	●	Global PA
200806	●	Humira (Adalimumab)
201511-CC	●	Opdivo (Nivolumab)
201101	●	Actemra IV (Tocilizumab)

99002	●	Viscos/Hyaluronic Acid Derivatives
		  Durolane
		  Euflexxa
		  Gel-One
		  Gelsyn-3
		  GenVisc 850
		  Hyalgan
		  Hymovis
		  Monovisc
		  Orthovisc
		  Synvisc
		  Synvisc-One
		  Supartz/Supartz FX

200913	●	Cimzia (Certolizumab Pegol)
201508	●	Cosentyx (Secukinumab)
200809	●	Orencia IV (Abatacept)
201410-CC	●	Oncology Medications
201603	●	Kineret (Anakinra)

201534	●	Lysosomal Storage Disorders
		  Aldurazyme (Laronidase)
		  Elaprase (Idursulfase)
		  Fabrazyme (Agalsidase Beta)
		  Kanuma (Sebelipase Alfa)
		  Lumizyme (Alglucosidase Alfa)
		  Mepsevii (Vestronidase Alfa-vjbk)
		  Myozyme (Alglucosidase Alfa)
		  Naglazyme (Galsulfase)
		  Vimizim (Elosulfase Alfa)

201001	●	Simponi SC (Golimumab)
201612	■	Probuphine (Buprenorphine)
201619-CC	●	Tecentriq (Atezolizumab)
201012	●	Stelara (Ustekinumab)

Policy Number		**Title**
200809	●	Orencia (Abatacept)
201606	●	Taltz (Ixekizumab)

201427-CC	●	Leuprolide ER
		  Eligard
		  Lupaneta Pack
		  Lupron Depot
		  Lupron Depot-Ped
		  Triptodur (Triptorelin)

201003	●	ERT for Gaucher
		  Cerezyme
		  Elelyso
		  Vpriv

201708	●	Ocrevus (Ocrelizumab)
201613	■	Vivitrol (Naltrexone)
201417	●	Zometa (Zolendronic Acid)
201421	●	Soliris (Eculizumab)
201703	●	Ilaris (Canakinumab)
201734	▲	Zilretta (Triamcinolone ER)
201801	▲	Pain management medications
201307	●	Copaxone/Glatopa (Glatiramer Acetate)

201306	●	Interferon Beta
		  Avonex
		  Betaseron
		  Extavia
		  Plegridy
		  Rebif

201529	●	Repatha (Evolocumab)
201528	●	Praluent (Alirocumab)
201730	▲	Fasenra (Benralizumab)
201420	●	Xolair (Omalizumab)
201601-CC	●	Nucala (Mepolizumab)
201620	●	Jevtana (Cabazitaxel)
201519	●	Sandostatin/Sandostatin LAR Depot (Octreotide Acetate)
201712	●	Gazyva (Obinutuzumab)

201602-CC	●	Testosterone Injection and Pellet
		  Depo-Testosterone (Testosterone Cypionate)
		  Delatestryl (Testosterone Enanthate)
		  Aveed (Testosterone Undecanoate)
		  Testopel (Testosterone) Pellet

201802	▲	Luxturna (Voretigene Neparvovec-rzyl)
201725	●	Orencia SC (Abatacept)
201403	●	Simponi Aria (Golimumab)

▲ = New   ● = Revised   ■ = Retired

Pharmacy

Important Information about Prior Authorizations for Drugs under the Prescription Benefit

As of January 1, 2018, drug-specific fax forms are no longer available via the Medical Mutual Provider Portal (Provider.MedMutual.com) when accessed via Tools & Resources, Care Management, Rx Management.

Prior authorizations for drugs under the prescription drug benefit are managed by Express Scripts. The most convenient and easiest way for providers to complete a prior authorization is through the electronic prior authorization (ePA) process using the provider's ePA software or vendor of choice. Express Scripts also offers a free electronic portal, ExpressPAth, where you can initiate, complete, or check the status of your prior authorization request. ExpressPAth can be accessed via Provider.Express-PAth.com. To complete prior authorization requests via fax, please call (800) 753-2851 to initiate a review and Express Scripts will send you a pre-populated fax form.
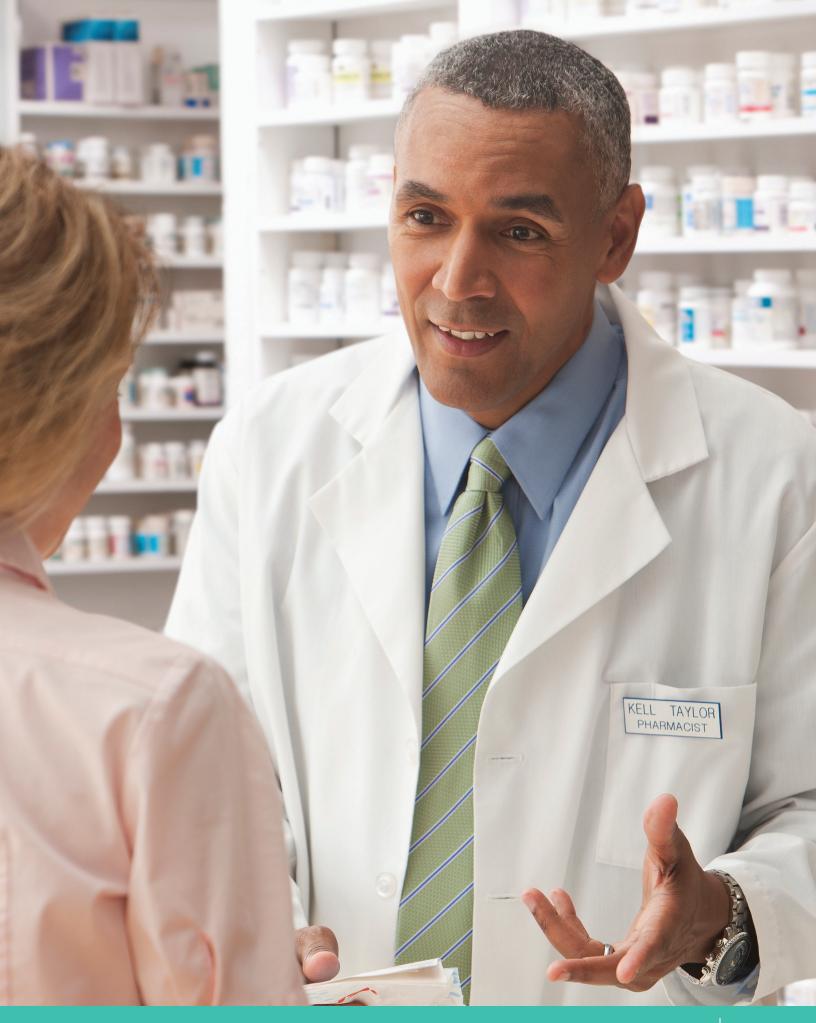
Notice of Changes to Prior Authorization Requirements

Medical Mutual requires prior approval for all of the following drugs filled under the medical or pharmacy benefits:

- All new specialty drugs
- All new drugs with significant safety, clinical, or potential abuse or diversion concerns

This requirement is intended to ensure medications are used safely and will be effective for members. The prior approval criteria for these drugs are contained in the New Drug Prior Approval policy available at Provider.MedMutual.com:

- For medical policies, select Tools & Resources, Care Management, Corporate Medical Policies. Here you will also find revisions to our Corporate Medical Policies, as well as information about our prior approval services and ExpressPAth, a web-based tool providers can use to manage prior approval requests for medications covered under the medical benefit.
- For pharmacy policies, select Tools & Resources, Care Management, Rx Benefit Management, Coverage Management (Prior Authorization). Here you will also find revisions to our pharmacy prior authorization policies, as well as information about quantity limits, step therapy and formulary updates.

Medicare Advantage

Prescriber Enrollment

Effective January 1, 2019, Medicare beneficiaries filling Part D prescriptions written by physicians or other eligible professionals not enrolled in or validly opted out of Medicare will receive a 90-day provisional supply. These patients will also receive a notice explaining that any future prescriptions written by this prescriber will be denied at the point of sale unless the provider enrolls in or validly opts out of Medicare.

To ensure minimal disruption for Medicare patients, Centers for Medicare and Medicaid Services (CMS) is asking providers to take action by enrolling in or validly opting out of Medicare as soon as possible.

More information about prescriber enrollment can be found at:
CMS.gov/Medicare/Provider-Enrollment-and-Certification/MedicareProviderSupEnroll/Prescriber-Enrollment-Information.

Provider Directory Accuracy

The Medicare Advantage provider directory is the most common tool members and their caregivers use to access information about providers. Accurate and up-to-date provider information is key to ensuring Medical Mutual members have access to the healthcare they need, when they need it, without having to call multiple phone numbers and locations.

In order to determine whether a location should be listed in the directory, providers should ask themselves the following question: Can a member schedule a visit at the location listed in the directory, using the phone number listed in the directory?

- If the answer is yes, then the location should be listed.
- If the answer is no, then the location should not be listed.

Some examples of locations that should not be published in the directory are:

- Hospital locations, unless the provider has an office located in the hospital at which members can schedule appointments
- Satellite locations at which the provider does not regularly practice
- Locations where the provider is rotating, substituting or on call

Once a provider determines a location should be listed in the directory, the provider should make sure the phone number is correct and notify Medical Mutual if the provider is not accepting new patients.

For further information and review of the locations a provider has listed in the directory, providers should contact their provider contracting representative.