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2020 Spring Provider Workshop

In response to the COVID-19 pandemic, we have opted to produce a virtual video version of our annual Healthcare Provider Workshops instead of our traditional face-to-face gathering. Four videos are available for you to view at your convenience:

- General Network Update
- Medi-Pak® Advantage & Quality/Risk Updates
- COVID-19 Special Update
- AHIN to Availity transition information

Go to [2020 Spring Provider Workshop](#) to view the videos.

COVID-19 update

Arkansas Blue Cross and Blue Shield and Health Advantage described a temporary change to our policy in the March issue of Arkansas Blue Cross *Providers' News*. We revised that temporary policy on March 24, 2020, making it retroactive to March 16, 2020. The changes will be in effect through at least July 25, 2020, and could be extended beyond that date, if circumstances warrant. This update provides additional clarity to what was published on March 24.

This revision applies to fully-insured Arkansas Blue Cross and Health Advantage plans including Individual Metallic Exchange Plans. It does not necessarily apply to any self-funded plan (like Walmart, Tyson Foods, or J.B. Hunt, etc.) because each of those plan-sponsors decides their own telehealth coverage policy. The Arkansas State Employees/Public School Employees have opted in to these temporary policy changes regarding telemedicine. You should contact the customer service departments for FEP and out-of-state BlueCard plans for their policy on telehealth services and how benefits will be applied.

No copays, coinsurance, or deductibles will be applied to the allowances for CPT codes where noted. If you have questions, please contact your Arkansas Blue Cross Network Development Representative (NDR). Click [here](#) for your NDR contact information.

Any of the submitted codes are still subject to contractual limitations, coverage criteria and any applicable payment edits.

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Telemedicine Codes approved in response to the COVID-19 pandemic for in-network providers seeing ABCBS fully-insured members (BC, HA, and Metallic) for the duration of March 16, 2020 through July 25, 2020

1) **No cost share: The below codes may be billed by MD/DOs and APRN/CNP/CNW/PAs.**

The below codes require modifier –95 or –GT and POS 02

- 99201** Office or other outpatient visit for the evaluation and management of a new patient. Usually, the presenting problem(s) are self-limited or minor. Typically, 10 minutes are spent face to face with the patient and/or family.
- 99202** Office or other outpatient visit for the evaluation and management of a new patient. Usually, the presenting problem(s) are of low to moderate severity. Typically, 20 minutes are spent face to face with the patient and/or family.
- 99203** Office or other outpatient visit for the evaluation and management of a new patient. Usually, the presenting problem(s) are of moderate severity. Typically, 30 minutes are spent face to face with the patient and/or family.
- 99204** Office or other outpatient visit for the evaluation and management of a new patient. Usually, the presenting problem(s) are of moderate to high severity. Typically, 45 minutes are spent face to face with the patient and/or family.
- 99211** Office or other outpatient visit for the evaluation and management of an established patient. Usually, the presenting problem(s) are minimal. Typically, 5 minutes are spent performing or supervising these services.
- 99212** Office or other outpatient visit for the evaluation and management of an established patient. Usually, the presenting problem(s) are self-limited or minor. Typically, 10 minutes are spent face to face with the patient and/or family.
- 99213** Office or other outpatient visit for the evaluation and management of an established patient. Usually, the presenting problem(s) are of low to moderate severity. Typically, 15 minutes are spent face to face with the patient and/or family.
- 99214** Office or other outpatient visit for the evaluation and management of an established patient. Usually, the presenting problem(s) are of moderate to high severity. Typically, 25 minutes are spent face to face with the patient and/or family.

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- 2) **No cost share: The below codes may be billed by clinical psychologists (PhD/PsyD/EdD), licensed psychological examiners (LPE), advance nurse practitioners (APNs) with psychiatric certification, licensed clinical social workers (LCSWs), licensed professional counselors (LPCs), and physicians (MDs and DOs).**

The below codes must be billed with modifier –95 or –GT and POS 02

90791 Psychiatric diagnostic evaluation

90792 Psychiatric diagnostic evaluation with medical services

90832 Psychotherapy, 30 minutes with patient

90833 Psychotherapy, 30 minutes with patient when performed with an evaluation and management service (List separately in addition to the code for primary procedure.)

90834 Psychotherapy, 45 minutes with patient

90836 Psychotherapy, 45 minutes with patient when performed with an evaluation and management service (List separately in addition to the code for primary procedure.)

90837 Psychotherapy, 60 minutes with patient

90838 Psychotherapy, 60 minutes with patient when performed with an evaluation and management service (List separately in addition to the code for primary procedure.)

90845 Psychoanalysis

90846 Family psychotherapy (without the patient present), 50 minutes

90847 Family psychotherapy (conjoint psychotherapy) (with patient present), 50 minutes

- 3) **No cost share: The below codes may be billed by clinical psychologists (PhD/PsyD/EdD), licensed Psychological examiners (LPE), advance nurse practitioners (APNs) with/without psychiatric certification, certified nurse practitioners (CNP), certified nurse midwives (CNW), physician assistants (PAs), licensed clinical social workers (LCSWs), licensed professional counselors (LPCs), and physicians (MDs and DOs).**

The below codes must be submitted with POS 02.

99421 Online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 5–10 minutes

99422 Online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 11–20 minutes

99423 Online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 21 or more minutes

- 99441** Telephone evaluation and management service by a physician or other qualified health care professional who may report evaluation and management services provided to an established patient, parent, or guardian not originating from a related E/M service provided within the previous 7 days nor leading to an E/M service or procedure within the next 24 hours or soonest available appointment; 5–10 minutes of medical discussion
- 99442** Telephone evaluation and management service by a physician or other qualified health care professional who may report evaluation and management services provided to an established patient, parent, or guardian not originating from a related E/M service provided within the previous 7 days nor leading to an E/M service or procedure within the next 24 hours or soonest available appointment; 11–20 minutes of medical discussion
- 99443** Telephone evaluation and management service by a physician or other qualified health care professional who may report evaluation and management services provided to an established patient, parent, or guardian not originating from a related E/M service provided within the previous 7 days nor leading to an E/M service or procedure within the next 24 hours or soonest available appointment; 21–30 minutes of medical discussion

The Arkansas Blue Cross and Blue Shield coverage policy 2015034 remains in effect. Providers noted in the coverage policy may continue to submit claims as described in the policy for other codes. These claims and codes will be subject to copay, coinsurance, and deductible.

- 4) No cost share applied to the following Neuropsychological testing codes when performed by in-network Psychologist, Psychological Examiners or MD/DO. Codes must be submitted with place of service 02 and modifier –95 or –GT to indicate billing of a telehealth service. However, all other contractual limitations will still apply.**

- 96132** Neuropsychological testing evaluation services by physician or other qualified health care professional, including integration of patient data, interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report, and interactive feedback to the patient, family member(s) or caregiver(s), when performed; first hour
- 96136** Psychological or neuropsychological test administration and scoring by physician or other qualified health care professional, two or more tests, any method; first 30 minutes
- 96138** Psychological or neuropsychological test administration and scoring by technician, two or more tests, any method; first 30 minutes
- 96139** Psychological or neuropsychological test administration and scoring by technician, two or more tests, any method; each additional 30 minutes (List separately in addition to code for primary procedure)

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Again, if you have questions, please contact your Arkansas Blue Cross Network Development Representative at this link: <https://www.arkansasbluecross.com/providers/resource-center/network-development-reps>. This information is also available on AHIN.

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Changes to telehealth access for PT, OT, SLT, DC, DPM, RDN, BCBA & OD during pandemic*

To further assist our members and providers in their efforts to practice social distancing, Arkansas Blue Cross and Blue Shield and Health Advantage are making additional temporary changes in benefits by allowing their fully insured members telemedicine access to in network providers delivering specific services by physical therapists, occupational therapists, speech and language therapists, chiropractors, podiatrists, registered dietitians, board certified behavioral analysts and optometrists. There will be no waiver of cost share (e.g. copays, deductibles, and coinsurance) for these services, and all contractual limitations, conditions, policies, and procedures will apply.

Arkansas Blue Cross and Health Advantage have voluntarily increased overall compensation for telemedicine services for fully insured members by reimbursing all such services at the “office” level. This payment enhancement became effective for these specific services rendered beginning April 1, and will continue through July 25, 2020.

Codes must be submitted with place of service 02 and modifier 95 or GT to indicate billing of a telehealth service. Appropriate documentation commensurate with the level of service provided and submitted for payment is to be placed in the medical record.

Providers are responsible for ensuring that they are in compliance with Arkansas law for their specialty regarding telemedicine.

Only the following codes will be reimbursed for telemedicine. Telephonic codes do not apply.

Physical Therapy (PT)—97161, 97162, 97163, 97164, 97110, 97112, 97116, 97535

Occupational Therapy (OT)—97165, 97166, 97167, 97168, 97110, 97112, 97116, 97535, 92523

Speech & Language Therapy (SLT)—92507, 92521, 92522, 92523, 92524, 92526, 92610, 96105, 97110

Chiropractic Medicine (DC)—99201, 99202, 99203, 99204, 99211, 99212, 99213, 99214 (used for initial evaluation or re-evaluation when submitted without a manipulation code)

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Podiatric Medicine (DPM)—99201, 99202, 99203, 99204, 99211, 99212, 99213, 99214

Registered Dieticians (RDN)—97802, 97803, 97804, G0108, G0109

Board Certified Behavioral Analyst—

- 97153, 97155, 97156 (these services will be subject to coverage policy 2017002, only 50% services hours can be performed by telemedicine, subject to prior approval guidelines.)
- 97151, 97152 (these services will be subject to coverage policy 2011053, subject to prior approval guidelines.)

Optometrists—99201, 99202, 99203, 99204, 99211, 99212, 99213, & 99214 (Specialty 41).

*This article originally appeared in the April 13, 2020, special issue of *Providers' News*.

Answering providers' questions about our COVID-19 changes*

Telemedicine

Will Arkansas Blue Cross and Health Advantage cover telemedicine, including video and telephone calls for providers at in-clinic rates?

Yes. To further assist providers in their efforts to practice social distancing to reduce risks of exposure to COVID-19, Arkansas Blue Cross and Blue Shield and Health Advantage voluntarily increased overall compensation for telemedicine services for fully insured members by reimbursing all such services at the “office” level. This payment enhancement became effective for services rendered beginning March 16, and will continue through July 25, at which time the policy will be revisited. All providers must be in network which include physicians (MDs and DOs), advance practice nurse practitioners, physician assistants and behavioral health professionals (in-network psychiatrist, clinical psychologist, advance practice nurse practitioner, licensed clinical social worker, licensed psychological examiner, or licensed professional counselor). Appropriate documentation commensurate with the level of service provided and submitted for payment is to be placed in the medical record.

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Can telemedicine be used for wellness visits?

Yes, physicians (MDs and DOs), advance practice nurse practitioners, and physician assistants can use telemedicine for wellness/preventative visits. Appropriate documentation commensurate with the level of service provided and submitted for payment is to be placed in the medical record. Providers may submit all of the wellness/preventative visit codes ranging from 99381 through 99397. Claims should be billed with POS 02 and either the GT or 95 modifiers.

What codes should I use if I am seeing my patients virtually, either by audiovisual or telephone appointments?

Physicians (MDs and DOs), advance practice nurse practitioners, physician assistants and behavioral health professionals who are seeing patients virtually either with audiovisual or telephone should use the telemedicine CPT (E&M) codes, not the telephonic CPT codes. Providers may submit the E&M codes [listed here](#). Claims should be billed with POS 02 and either the GT or 95 modifiers.

Are HIPAA-defined secure video requirements relaxed for telemedicine during the pandemic?

Yes. You do not have to have secure video for telemedicine and can use any type of telephone (without video) or any video connection. These will be reimbursed at the telemedicine rate. Physicians (MDs and DOs), advance practice nurse practitioners, physician assistants and behavioral health professionals who are seeing patients virtually either with audiovisual or telephone should use the telemedicine policy CPT (E&M) codes [listed here](#), not the telephonic CPT codes.

Are copays, coinsurance and deductibles waived for fully insured members for video or telephone-based doctor's visits? Does this include behavioral health?

Yes. We will waive all copays, coinsurance, and deductibles for medical care administered by telemedicine by in-network physicians (MDs and DOs), advance practice nurse practitioners, physician assistants and behavioral health professionals (see complete list [here](#)). This is for medical care, not just COVID-19 related issues. We will pay the lesser of billed charge or contract allowance. Telemedicine is also available for other therapies, but cost-shares and co-pays do apply.

Does the temporary in-office rate for telemedicine coverage include mental/behavioral health?

Yes. We will pay for telemedicine counseling using the specific CPT codes listed [above](#), by video or over the telephone, for our fully insured members by any in-network behavioral health professionals (in-network psychiatrist, clinical psychologist, advance practice nurse practitioner, licensed clinical social worker, licensed psychological examiner, or licensed professional counselor). This is being provided at no cost share to the member. Behavioral health professionals who are seeing patients virtually either with audiovisual or telephone should use the telemedicine CPT (E&M) codes [listed here](#), not the telephonic CPT codes.

What other types of therapies are covered by the temporary in-office rate?

At this time, only behavioral/mental health is covered via telemedicine, in addition to physician-administered medical care from MDs and DOs. Providers should access AHIN for specific coverage information.

Telemedicine is also available for other therapies, but cost-shares and co-pays do apply. See [this article](#) for more information.

COVID-19 Testing Costs

[Will Arkansas Blue Cross and Health Advantage cover COVID-19 specific testing at no cost to members? What about additional testing for flu or strep?](#)

Yes. We will cover the testing by in-network providers to diagnose COVID-19. The only recommended definitive test for COVID-19 is the RT-PCR test (CPT Code 87635) which involves swabbing the nose and/or mouth. If an influenza or group A Streptococcus bacteria test are administered as part of the COVID-19 testing, they will be paid as well. The influenza CPT Codes are 87804 and 86710 and the group A Streptococcus bacteria CPT Codes is 87880. This change will be retroactive to March 16. These claims should be submitted with the modifier “CS.”

[Will virtual or physical visits for COVID-19 testing be covered if a patient does not get tested?](#)

Yes. We will cover COVID-19 evaluation visits without cost share if submitted with the modifier “CS” even if a COVID-19 test was not done, but the intent of the visit was to evaluate the member for COVID testing, not an unrelated medical condition (e.g. diabetes, hypertension, etc.)

COVID-19 Specific Treatment

[Will Arkansas Blue Cross and Health Advantage waive patient cost sharing for all COVID-19 treatment?](#) We will waive cost sharing (copay, coinsurance, deductible) for our fully insured members for a visit to a medical clinic, urgent care facility and emergency room, as well as inpatient treatment when there is a COVID-19 primary diagnosis. **A visit that involves treatment or testing not related to COVID-19 will be subject to cost sharing.**

This adjustment in coverage will be effective from April 1, through July 25, 2020, at which time it will be re-evaluated. Any claim for COVID-19 evaluation should include a “CS” modifier and include the ICD-10 diagnostic code of U07.1. The waiver also will apply to ACIP-approved vaccines when they become available.

[Does this include emergency transport for fully insured members to designated quarantine or treatment centers?](#)

We will cover emergency/ambulance services in accordance with and subject to the limitations of a member’s insurance policy. Transportation solely for quarantine purposes (rather than treatment) would not be covered, and most insurance policies limit the amount of benefits available for both ground and air ambulance services.

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Early Prescription Refills Allowed

Will you waive prescription quantity/supply limits or allow for early refills to enable members to stock up on prescription maintenance medication due to shortages caused by COVID-19?

Yes. Our fully insured members can request early prescription refills, up to 90 days, on most maintenance medications. We also allow for flexibility in our prescription drug formulary if there are medication shortages or access issues.

Prior Authorizations / Pre-certifications Suspended

Will Arkansas Blue Cross and Health Advantage suspend prior authorizations and pre-certifications for insured members for hospital inpatient, outpatient and ambulatory surgery centers?

Yes. We are temporarily stopping prior authorizations and pre-certifications for hospital inpatient, outpatient and ambulatory surgery centers for our fully insured members through July 25, 2020, at which time this temporary policy will be re-evaluated. This change does not apply to prior authorizations for prescription and specialty medication, high-tech radiology services or long-term acute-care hospitals.

While prior approvals are temporarily stopped, we still require a call so our care management teams can support members being transitioned to their homes. For outpatient procedures, you will continue to receive system-generated medical record requests, but you may disregard them. This does not guarantee coverage of services rendered.

When you call, our intake team will let you know if the patient is covered under a plan that does not require prior approvals. If the patient's plan requires prior approvals, you must provide the medical information requested for the services to be covered.

*This article was originally published in the April 2020 special issue of *Providers' News* and has been updated.

Coverage Policy manual updates

Since March 2020, Arkansas Blue Cross has added or updated several policies in its Coverage Policy manual. The table below highlights these additions and updates. If you want to view entire policies, you can access the coverage policies located on our website at arkansasbluecross.com.

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Policy ID	Policy Name
2015014	Amniotic Membrane and Amniotic Fluid Injections
2016005	Anti-PD-1 (programmed death receptor-1)Therapy (Nivolumab) (Durvalumab) (Cemiplimab)
2011053	Autism Spectrum Disorder, Applied Behavioral Analysis
2017006	Bevacizumab (Avastin™) for Oncologic Indications
2018024	Burosumab-twza (Crysvita®)
2010000	Capsaicin (Qutenza) for the Treatment of Post-Herpetic Neuralgia
2016013	CD 5 Complement Inhibitors
2018002	Chemodenervation, Botulinum Toxins
1997036	Cognitive Rehabilitation
2005010	Computed Tomography, Cardiac and Coronary Artery
2017026	Edaravone
2014026	Electric Breast Pump (Hospital Grade)
2010005	Electrical Stimulation, Percutaneous Electrical Nerve Stimulation (PENS) or Percutaneous Neuromodulation Therapy (PNT)
1998168	Etanercept (Enbrel)
2018021	Gene Therapy for Inherited Retinal Dystrophy-Voretigene (Luxturna)
1998051	Genetic Test: BRCA1 or BRCA2 Mutations
2015004	Genetic Test: Breast Cancer Risk Assessment (PALB2, CHEK2, ATM)
2003018	Genetic Test: Fecal DNA to Detect Colorectal Cancer, Screening
2007024	Genetic Test: HER2 Testing
1997087	Growth Hormone, Human
2017034	Inotuzumab Ozogamicin (Besponsa™)
1997105	Interferon Gamma-1B
1998095	Intraoperative Neurophysiologic Monitoring
1998112	Intraoperative Radiation Therapy
2010046	Intravitreal Corticosteroid Implants
2011006	Ipilimumab (Yervoy™)
2003024	Kyphoplasty, Percutaneous, Radiofrequency, and Mechanical Vertebral Augmentation
2018000	Leadless Cardiac Pacemakers
2018023	Levodopa-carbidopa Intestinal Gel (Duopa®) for Treatment of Advanced Parkinson's Disease
1997126	Low Level Laser Therapy (LLLT)
2016010	Mepolizumab (Nucala)
2015024	Minimally Invasive Benign Prostatic Hyperplasia (BPH) Treatments
2018025	Mucopolysaccharidoses Agents
2017033	Octreotide Acetate for Injectable Suspension (Sandostatin® LAR Depot)
2017014	Olaratumab (LARTRUVO™)
2016021	Paliperidone Palmitate (Long-acting Injectables Invega Sustenna® & Invega Trinza)
2019005	Pembrolizumab (KEYTRUDA®)
2000001	PET or PET/CT for Colorectal Cancer
2000003	PET or PET/CT for Melanoma
1998156	PET or PET/CT for Non-Small Cell Lung Cancer
2001038	PET or PET/CT for Pancreatic Cancer
2001035	PET or PET/CT for Prostate Cancer
2011020	Preventive services for non-grandfathered (PPACA) plans: Bacteriuria screening in pregnant women
2011066	Preventive services for non-grandfathered (PPACA) plans: Overview
2003022	Radioimmunosciintigraphy Imaging - Indium-111 Capromab Pendetide (ProstaScint)

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Policy ID	Policy Name
2009040	Radioimmunotherapy in the Treatment of Non-Hodgkin Lymphoma
2013048	Repository Corticotropin Injection
2006016	Rituximab (Rituxan)
2012030	Sinus Spacers, Stents, and Implants, following Endoscopic Sinus Surgery
2012009	Skin and Soft Tissue Substitutes, Bio-Engineered Products
2015035	Sleep Apnea, Minimally Invasive Surgical Treatment
1997137	Strontium 89, Metastron
2013030	Teduglutide (GATTEX®) for Short Bowel Syndrome (SBS)
2015034	Telemedicine
2015028	Testosterone Replacement Therapy
2016008	Thermal Ablation of Peripheral Nerves to Treat Pain Associated with Plantar Fasciitis, Knee Osteoarthritis, Sacroiliitis and Other Conditions
2014017	Transcatheter Mitral Valve Repair
2013015	Treatment of Varicose Veins/Venous Insufficiency
2015011	Vedolizumab (Entyvio) for Inflammatory Bowel Disease
1999012	Vertebroplasty, Percutaneous
1998119	Viscosupplementation for the Treatment of Osteoarthritis of the Hip, Knee, and All Other Joints

Federally required annual compliance training notice

Arkansas Blue Cross and Blue Shield is required by the federal government to ensure that certain individuals and entities with whom we do business (including healthcare-related professionals and organizations) complete general compliance training and fraud, waste and abuse training annually. This year, the training will be released in the fall.

Who must complete training?

General compliance training and fraud, waste and abuse training (where applicable), should be completed annually by **all persons** who have contact (indirect or direct) with beneficiaries of the federal Centers for Medicare & Medicaid Services (CMS) and members covered by the Affordable Care Act. This includes staff in all billing, reception, lab and clinical areas.

General compliance training is required for all persons who meet the above criteria, but certain individuals and entities who participate in the Medicare program are deemed to have met the **fraud, waste and abuse training** component by virtue of satisfying Medicare's annual certification requirements. This includes entities and/or individuals who are:

- Participating healthcare providers in the federal Medicare program (Parts A and/or B).
- Accredited, Medicare-approved suppliers of durable medical equipment, prosthetics, orthotics and supplies.

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When should training be complete?

The general compliance training and/or fraud, waste and abuse training must occur within 90 days of initial hiring and annually thereafter. The annual training will be released September 2020 and must be completed by the end of the calendar year. Training must be documented, and all documentation is subject to random audit by Arkansas Blue Cross or the federal government.

Direct any questions to regulatorycompliance@arkbluecross.com.

In-network laboratory reminder: correction

Please note a correction to the March 2020 *Providers' News* "In-network laboratory reminder" article.

The last paragraph should read, "If an out-of-network laboratory is used, members **are** financially responsible for all services not paid by the health plan."

Intra-fraction localization and tracking reported with HCPCS G6017

Arkansas Blue Cross and Blue Shield has updated Coverage Policy 2009001 which addresses Real Time Intra-Fraction Target Tracking to add coverage of real-time intra-fraction localization when used with deep inspiration breath-hold irradiation for the treatment of left-sided breast cancer to minimize negative side effects from radiation therapy. The intra-fraction localization is expected to be billed with HCPCS G6017. When this procedure is used with IMRT, the technical component of the code is bundled with the IMRT delivery code so we would expect only the professional component to be billed. When used with conventional or 3D conformal radiation, the global code is appropriate in the freestanding setting. In the hospital, only the professional component should be billed.

The rationale for this change and the complete Coverage Policy can be accessed at the following link:

<https://secure.arkansasbluecross.com/members/report.aspx?policyNumber=2009001>.

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Arkansas Blue Cross and Blue Shield and its family of companies have chosen MDLive as a telehealth option for its fully-insured clients. Click [here](#) for more information about joining the MDLive team. MDLive has partnered with Arkansas Blue Cross to expedite onboarding and credentialing.

Medical specialty prior approval medications update

On April 1, 2018, Arkansas Blue Cross and Blue Shield and its family of companies enacted prior approval for payment of specialty medications used in treating rare, complex conditions that may go through the medical benefit. Since then, medications have been added to the initial list as products come to market.

The table below is the current list of medications that require prior approval through the member's medical benefit. **ASE/PSE and Medicare are not included in this prior approval (PA) program.** It is also indicated when a medication is required to be processed through the pharmacy benefit. Any new medication used to treat a rare disease should be considered to require prior approval.

Drug	Indication	Benefit
Adakveo (crizanlizumab-tcma)	Sickle cell disease	Medical
Aldurazyme (laronidase)	MPS I Hurler syndrome	Medical
Berinert (c1 esterase, inhib, human)	Hereditary angioedema	Medical
Brineura (ceroliponase alfa)	CLN2 disease	Medical
Cablivi (caplacizumab-yhdp)	Thrombocytic thrombocytopenia	Medical & Pharmacy
Cinqair (reslizumab)	Severe asthma	Medical

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Cinryze (c1 Esterase, inhib, human)	Hereditary angioedema	Medical
Crysvita (burosumab - twza)	Hypophosphatemia	Pharmacy
Duopa (levodopa-carbidopa intestinal gel)	Parkinson's	Medical
Elaprase (idursulfase)	MPS II Hunter syndrome	Medical
Elzonris (tagraxifusp-erzs)	BPDCN	Medical
Evenity (romosozumab-aqqg)	Severe osteoporosis	Medical
Fabrazyme (agalsidase beta)	Fabry disease	Medical
Fasenra (benralizumab)	Mod to severe asthma	Pharmacy
Firazyr (icatabant acetate)	Hereditary angioedema	Pharmacy
Gamifant (emapalumab-lzsg)	Hemophagocytic lymphohistiocytosis	Medical
Givlaari (givosiran)	Acute hepatic porphyria	Medical
Haegarda (c1 esterase, inhib, human)	Hereditary angioedema	Pharmacy
Kalbitor (ecallantide)	Hereditary angioedema	Pharmacy
Krystexxa (pegloticase)	Gout	Medical

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Kymriah (tisagenlecleucel)	Cancers	Medical <i>*Reviewed by Transplant Coordinator</i>
Lemtrada (alemtuzumab)	Multiple Sclerosis	Medical
Lutathera (lutetium Lu 177 Dotatate)	Neuroendocrine tumors	Medical
Mepsevii (vestronidase-Alfa)	MPS VII Sly syndrome	Medical
Myalept (metreleptin)	Lipodystrophy	Pharmacy
Nagalzyme (galsulfase)	MPS VI Maroteaux-Lamy syndrome	Medical
Nucala (mepolizumab)	Mod to severe asthma	Pharmacy
Ruconest (c1 esterase, inhib, recombinant)	Hereditary angioedema	Medical
Soliris (eculizumab)	PNH aHUS Myasthenia Gravis NMOSD	Medical
Spinraza (nusinersen)	Spinal muscle atrophy	Medical
Spravato (esketamine)	Treatment resistant depression	Pharmacy
Strensiq (asfotase alfa)	Hypophosphatasia	Pharmacy
Tepezza (teprotumumab)	Thyroid eye disease	Medical
Ultomiris (ravulizumab-cwyz)	PNH	Medical

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Vimizim (elosulfase alfa)	MPS IV Morquio A	Medical
Yescarta (axicabtagene ciloleucel)	Cancers	Medical <i>*Reviewed by Transplant Coordinator</i>
Xolair (omalizumab)	Mod to severe asthma Urticaria	Medical & Pharmacy
Zolgensma (onasemnogene abeparvovec- XIOI)	Spinal muscle atrophy	Medical
Zulresso (brexanolone)	Postpartum depression	Medical

For more information on how to submit a request for prior approval of one of these medications, call the appropriate customer service phone number on the back of the member ID card.

Customer service will direct callers to the prior approval form specific to the member's group. BlueAdvantage members can find the form at the following link:

<https://www.blueadvantagearkansas.com/providers/forms.aspx>.

For all other members, the appropriate prior approval form can be found at the following link:

<https://www.arkansasbluecross.com/providers/resource-center/provider-forms>.

These forms and any additional documentation should be faxed to 501-210-7051 for BlueAdvantage members. For all other members, the appropriate fax number is 501-378-6647.

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National drug codes required

Notice of Material Amendment to Arkansas Blue Cross and Blue Shield, Blue Advantage Administrators of Arkansas and Health Advantage lines of business

Effective October 1, 2020, National Drug Codes (NDC) must be included along with all drug codes being submitted on institutional and professional claims (837I and 837P). This will usually include all J codes but will apply to all drug codes being submitted for reimbursement. This requirement is for all Arkansas Blue Cross and Blue Shield, Blue Advantage Administrators of Arkansas and Health Advantage lines of business. This has already been required by the Blue Federal Employee Plan. Failure to include a correct NDC in the appropriate format will result in the claim being rejected back to the provider.

Instructions for an electronic claim

The following loops/segments will be required when filing 837 Professional & Institutional Claims when a drug code is present on a claim:

Loop 2410 = NDC

Segments:

LIN02 = N4 qualifier

LIN03 = NDC code quantity

Unit of Measure

Instructions for a paper claim*

Block 24 — Supplemental Information: The following are types of supplemental information that can be entered in the shaded areas of Item Number 24.

National Drug Codes (NDC) for drugs – must have N4 qualifier followed by 11 digit NDC code. Do not put a space between the qualifier and code; do not use hyphens in the code.

Placing the following information in the shaded areas as shown on the NUCC site should be as “FYI” only since the data may not image properly. Arkansas Blue Cross does not recommend the use of this free form line. However, if it is used, it is critical that the right qualifiers be used.

*Reprinted from p. 17 in the June 2007 issue of *Providers' News*

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Standard formulary changes effective July 1, 2020

Additions

Product	Therapeutic Category/ Subcategory	Options/Comments
Baqsimi (glucagon) intranasal powder	Endocrine and Metabolic/ Glucose Elevating Agents	To provide an additional option for the treatment of severe hypoglycemia.
Bryhali (halobetasol propionate) topical lotion	Topical/ Dermatology/ Corticosteroids/ High Potency	To provide an additional topical option for the treatment of plaque psoriasis.
Emgality 100 mg/mL (galcanezumab-gnlm) subcutaneous solution for injection	Central Nervous System/ Migraine/ Preventive Migraine Agents/ Monoclonal Antibodies	To provide an option for the treatment of cluster headaches.
Nurtec ODT (rimegepant) orally disintegrating tablet	Central Nervous System/ Migraine/ Acute Migraine Agents/ Newer Agents	To provide an additional option for the acute treatment of migraine headaches.
Onexton (clindamycin- benzoyl peroxide) topical gel	Topical/ Dermatology/ Acne/ Topical	To provide an additional option for the topical treatment of acne.
Praluent (alirocumab) subcutaneous solution for injection	Cardiovascular/ Antilipemics/ PCSK9 Inhibitors	To provide an option for secondary prevention of cardiovascular events and high cholesterol.
Reyvow (lasmiditan) oral tablet	Central Nervous System/ Migraine/ Acute Migraine Agents/ Newer Agents	To provide an additional option for the acute treatment of migraine headaches.

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Product	Therapeutic Category/ Subcategory	Options/Comments
Rybelsus (semaglutide) oral tablet	Endocrine and Metabolic/ Antidiabetics/ Incretin Mimetic Agents	To provide an additional option to improve glycemic control in adults with type 2 diabetes mellitus.
Symjepi (epinephrine) intramuscular/ subcutaneous solution for injection	Respiratory/ Anaphylaxis Treatment Agents	To provide an additional option for the emergency treatment of allergic reactions.
Symtuza (darunavir- cobicistat-emtricitabine- tenofovir alafenamide) oral tablet	Anti-Infectives/ Antiretroviral Agents/ Antiretroviral Combinations	To provide an additional combination option for the treatment of HIV-1.
Ubrovelvy (ubrogepant) oral tablet	Central Nervous System/ Migraine/ Acute Migraine Agents/ Newer Agents	To provide an additional option for the acute treatment of migraine headaches.
Vumerity (diroximel fumarate delayed-rel) oral delayed-release capsule	Central Nervous System/ Multiple Sclerosis Agents	To provide an additional option for the treatment of relapsing forms of multiple sclerosis.
Yupelri (revefenacin) inhalation solution	Respiratory/ Anticholinergics	To provide an additional option for the maintenance treatment of COPD.

Medications moving to a higher tier

Product	Therapeutic Category/ Subcategory	Options/Comments
Apriso (mesalamine ext-rel) oral extended-release capsule	Gastrointestinal/ Inflammatory Bowel Disease/ Oral Agents	Preferred options include balsalazide, mesalamine delayed-rel caps, mesalamine delayed-rel tabs, mesalamine ext-rel caps, sulfasalazine, sulfasalazine delayed-rel, Azulfidine (sulfasalazine), Azulfidine EN-tabs (sulfasalazine delayed-rel), and Pentasa (mesalamine ext-rel caps).

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Product	Therapeutic Category/ Subcategory	Options/Comments
Celebrex (celecoxib) oral capsule	Analgesics/ COX-2 Inhibitors	The preferred option is celecoxib.
Daypro (oxaprozin) oral tablet	Analgesics/ NSAIDs	Preferred options include diclofenac sodium delayed-rel, diflunisal, etodolac, ibuprofen, meloxicam, nabumetone, naproxen sodium, naproxen sodium tabs, naproxen tabs, oxaprozin, sulindac, Advil (ibuprofen), and Aleve (naproxen sodium).
Dilaudid (hydromorphone) oral liquid, oral tablet	Analgesics/ Opioid Analgesics	Preferred options include hydrocodone-acetaminophen, hydromorphone, morphine, oxycodone caps and tabs 5 mg, oxycodone concentrate 20 mg/mL, oxycodone tabs 15 mg and 30 mg, oxycodone solution 5 mg/5 mL, oxycodone-acetaminophen 5/325, and Nucynta (tapentadol).
Esgic (butalbital- acetaminophen- caffeine tabs) oral tablet	Analgesics/ Non-Opioid Analgesics	Preferred options include butalbital-acetaminophen-caffeine tabs and butalbital-aspirin-caffeine.
Fiorinal (butalbital- aspirin-caffeine) oral capsule	Analgesics/ Non-Opioid Analgesics	Preferred include butalbital-acetaminophen-caffeine tabs and butalbital-aspirin-caffeine.
Isordil (isosorbide dinitrate) oral tablet	Cardiovascular/ Nitrates/ Oral	Preferred options include isosorbide dinitrate oral, isosorbide mononitrate, and isosorbide mononitrate ext-rel.
Kadian (morphine ext- rel)	Analgesics/ Opioid Analgesics	Preferred options include fentanyl transdermal, hydromorphone ext-rel, methadone, morphine ext-rel,

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Product	Therapeutic Category/ Subcategory	Options/Comments
oral extended-release capsule		Nucynta ER (tapentadol ext-rel), and Xtampza ER (oxycodone ext-rel).
Mobic (meloxicam) oral tablet	Analgesics/ NSAIDs	Preferred options include diclofenac sodium delayed-rel, diflunisal, etodolac, ibuprofen, meloxicam, nabumetone, naproxen sodium, naproxen sodium tabs, naproxen tabs, oxaprozin, sulindac, Advil (ibuprofen), and Aleve (naproxen sodium).
MS Contin (morphine ext-rel) oral extended-release tablet	Analgesics/ Opioid Analgesics	Preferred options include fentanyl transdermal, hydromorphone ext-rel, methadone, morphine ext-rel, Nucynta ER (tapentadol ext-rel), and Xtampza ER (oxycodone ext-rel).
Norco (hydrocodone-acetaminophen) oral tablet	Analgesics/ Opioid Analgesics	Preferred options include hydrocodone-acetaminophen, hydromorphone, morphine, oxycodone caps and tabs 5 mg, oxycodone concentrate 20 mg/mL, oxycodone tabs 15 mg and 30 mg, oxycodone solution 5 mg/5 mL, oxycodone-acetaminophen 5/325, and Nucynta (tapentadol).
NuvaRing (ethinyl estradiol-etonogestrel) vaginal ring	Endocrine and Metabolic/ Contraceptives/ Vaginal	The preferred option is ethinyl estradiol-etonogestrel.
Roxicodone (oxycodone tabs 15 mg, 30 mg) oral tablet	Analgesics/ Opioid Analgesics	Preferred options include hydrocodone-acetaminophen, hydromorphone, morphine, oxycodone caps and tabs 5 mg, oxycodone concentrate 20 mg/mL, oxycodone tabs 15 mg and 30 mg, oxycodone solution 5 mg/5 mL, oxycodone-acetaminophen 5/325, and Nucynta (tapentadol).
Sensipar (cinacalcet) oral tablet	Endocrine and Metabolic/ Calcium Receptor Antagonists	The preferred option is cinacalcet.
Uloric (febuxostat) oral tablet	Analgesics/ Gout	The preferred option is allopurinol.

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Product	Therapeutic Category/ Subcategory	Options/Comments
Ultram (tramadol) oral tablet	Analgesics/ Opioid Analgesics	Preferred options include tramadol (except NDC 52817019610) and tramadol ext-rel.
Zyloprim (allopurinol) oral tablet	Analgesics/ Gout	The preferred option is allopurinol.

Medications no longer covered

Product	Therapeutic Category/ Subcategory	Options/Comments
BRANDS		
Consensi (amlodipine- celecoxib) oral tablet	Cardiovascular/ Calcium Channel Blocker / Nonsteroidal Anti- Inflammatory Drug (NSAID) Combinations	Preferred options include amlodipine WITH celecoxib.
Norgesic Forte (orphenadrine-aspirin- caffeine) oral tablet	Central Nervous System/ Musculoskeletal Therapy Agents	Preferred options include carisoprodol, chlorzoxazone, cyclobenzaprine (except 7.5 mg tablet), metaxalone, methocarbamol, Robaxin (methocarbamol), and Skelaxin (metaxalone).
Repatha (evolocumab) subcutaneous solution for injection	Cardiovascular/ Antilipemics/ PCSK9 Inhibitors	The preferred option is Praluent (alirocumab).
Treximet (sumatriptan- naproxen sodium) oral tablet	Central Nervous System/ Migraine/ Selective Serotonin Agonist / Nonsteroidal Anti-inflammatory Drug (NSAID) Combinations	Preferred options include diclofenac sodium delayed-rel, diflunisal, etodolac, ibuprofen, naproxen sodium, naproxen sodium tabs, naproxen tabs, Advil (ibuprofen), or Aleve (naproxen sodium) WITH eletriptan, naratriptan, rizatriptan, sumatriptan, sumatriptan injection, sumatriptan nasal spray, zolmitriptan, Imitrex (sumatriptan), Maxalt (rizatriptan), Nurtec ODT (rimegepant), Onzetra Xsail (sumatriptan nasal powder), Relpax (eletriptan), Reyvow (lasmiditan), Ubrelyv

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Product	Therapeutic Category/ Subcategory	Options/Comments
		(ubrogepant), Zembrace SymTouch (sumatriptan injection), Zomig (zolmitriptan), or Zomig Nasal Spray (zolmitriptan).
GENERICS REMOVED DUE TO HYPER-INFLATED COST		
bimatoprost 0.03% ophthalmic solution	Topical/ Ophthalmic/ Prostaglandins	Preferred options include latanoprost, travoprost, Lumigan (bimatoprost), Travatan Z (travoprost), and Xalatan (latanoprost).
bupropion ext-rel tablet 450 mg oral extended-release tablet	Central Nervous System/ Antidepressants/ Miscellaneous Agents	Preferred options include bupropion, bupropion ext-rel (except bupropion ext-rel tablet 450 mg), Wellbutrin SR (bupropion ext-rel), and Wellbutrin XL (bupropion ext-rel).
chlorzoxazone 375 mg and 750 mg oral tablet	Central Nervous System/ Musculoskeletal Therapy Agents	Preferred options include carisoprodol, chlorzoxazone, cyclobenzaprine (except 7.5 mg tablet), metaxalone, methocarbamol, Robaxin (methocarbamol), and Skelaxin (metaxalone).
clindamycin gel 1% (NDC 68682046275 only) topical gel	Topical/ Dermatology/ Acne/ Topical	Preferred options include adapalene, adapalene-benzoyl peroxide, benzoyl peroxide, clindamycin gel (except NDC 68682046275), clindamycin lotion, clindamycin solution, clindamycin-benzoyl peroxide, erythromycin gel 2%, erythromycin solution, erythromycin-benzoyl peroxide, sulfacetamide lotion 10%, tazarotene, tretinoin, tretinoin – Avita, tretinoin gel microsphere, Benzac AC (benzoyl peroxide), Benzamycin (erythromycin-benzoyl peroxide), Cleocin T (clindamycin gel/lotion/solution), Epiduo (adapalene-benzoyl peroxide), Epiduo Forte (adapalene-benzoyl peroxide), Klaron (sulfacetamide lotion 10%), Onexton (clindamycin-benzoyl peroxide), Retin-A (tretinoin), and Tazorac (tazarotene).

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Product	Therapeutic Category/ Subcategory	Options/Comments
CoreMino (minocycline ext-rel) oral extended-release tablet	Anti-Infectives/ Antibacterials/ Tetracyclines	Preferred options include doxycycline hyclate 20 mg, doxycycline hyclate capsule, minocycline, tetracycline, and Vibramycin (doxycycline hyclate capsule).
cyclobenzaprine ext-rel oral extended-release capsule	Central Nervous System/ Musculoskeletal Therapy Agents	Preferred options include carisoprodol, chlorzoxazone, cyclobenzaprine (except 7.5 mg tablet), metaxalone, methocarbamol, Robaxin (methocarbamol), and Skelaxin (metaxalone).
doxycycline hyclate delayed-rel tablet 200 mg oral delayed-release tablet	Anti-Infectives/ Antibacterials/ Tetracyclines	Preferred options include doxycycline hyclate 20 mg, doxycycline hyclate capsule, minocycline, tetracycline, and Vibramycin (doxycycline hyclate capsule).
doxycycline hyclate tablet 50 mg (NDC 72143021160 only) oral tablet	Anti-Infectives/ Antibacterials/ Tetracyclines	Preferred options include doxycycline hyclate 20 mg, doxycycline hyclate capsule, minocycline, tetracycline, and Vibramycin (doxycycline hyclate capsule).
doxycycline hyclate tablet 75 mg and 150 mg oral tablet	Anti-Infectives/ Antibacterials/ Tetracyclines	Preferred options include doxycycline hyclate 20 mg, doxycycline hyclate capsule, minocycline, tetracycline, and Vibramycin (doxycycline hyclate capsule).
doxycycline monohydrate capsule 75 mg and 150 mg oral capsule	Anti-Infectives/ Antibacterials/ Tetracyclines	Preferred options include doxycycline hyclate 20 mg, doxycycline hyclate capsule, minocycline, tetracycline, and Vibramycin (doxycycline hyclate capsule).
ergotamine-caffeine oral tablet	Central Nervous System/ Migraine/ Ergotamine Derivatives	Preferred options include dihydroergotamine injection, eletriptan, naratriptan, rizatriptan, sumatriptan, zolmitriptan, D.H.E. 45 (dihydroergotamine injection), Imitrex (sumatriptan), Maxalt (rizatriptan), Nurtec ODT (rimegepant), Onzetra Xsail (sumatriptan nasal powder), Relpax (eletriptan), Reyvow (lasmiditan), Ubrelvy

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Product	Therapeutic Category/ Subcategory	Options/Comments
		(ubrogepant), Zembrace SymTouch (sumatriptan injection), Zomig (zolmitriptan), and Zomig Nasal Spray (zolmitriptan).
flucytosine capsule 500 mg oral capsule	Anti-Infectives/ Antifungals	The preferred option is fluconazole.
fluoxetine tablet 60 mg oral tablet	Central Nervous System/ Antidepressants/ Selective Serotonin Reuptake Inhibitors (SSRIs)	Preferred options include citalopram, escitalopram, fluoxetine (except fluoxetine tablet 60 mg), paroxetine HCl, paroxetine HCl ext-rel, sertraline, Celexa (citalopram), Paxil (paroxetine HCl), Paxil CR (paroxetine HCl ext-rel), Trintellix (vortioxetine), Viibryd (vilazodone), and Zoloft (sertraline).
flurandrenolide lotion (NDC 24470092112 only) topical lotion	Topical/ Dermatology/ Corticosteroids/ Low Potency	Preferred options include alclometasone cream, ointment 0.05%; desonide cream, lotion, ointment 0.05%; fluocinolone acetonide solution 0.01%; hydrocortisone cream 2.5%; hydrocortisone cream, ointment 0.5%, 1%; hydrocortisone lotion 1%; Cortizone (hydrocortisone cream, ointment 0.5%, 1%); and DesOwen (desonide cream, lotion, ointment 0.05%).
hydrocortisone butyrate lipophilic cream 0.1% topical cream	Topical/ Dermatology/ Corticosteroids/ Medium Potency	Preferred options include betamethasone valerate cream, lotion, ointment 0.1%; desoximetasone cream, ointment 0.05%; fluocinolone acetonide cream, ointment 0.025%; fluticasone propionate cream, lotion 0.05%, ointment 0.005%; hydrocortisone butyrate cream, lotion, ointment, solution 0.1%; hydrocortisone valerate cream, ointment 0.2%; mometasone cream, lotion, ointment 0.1%; triamcinolone acetonide cream, lotion 0.025%; triamcinolone acetonide cream, lotion, ointment 0.1%; and Elocon (mometasone cream, lotion, ointment 0.1%).

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Product	Therapeutic Category/ Subcategory	Options/Comments
ketoprofen capsule 25 mg oral capsule	Analgesics/ NSAIDs	Preferred options include diclofenac sodium delayed-rel, diflunisal, etodolac, ibuprofen, meloxicam, nabumetone, naproxen sodium, naproxen sodium tabs, naproxen tabs, oxaprozin, sulindac, Advil (ibuprofen), and Aleve (naproxen sodium).
Lorzone (chlorzoxazone) oral tablet	Central Nervous System/ Musculoskeletal Therapy Agents	Preferred options include carisoprodol, chlorzoxazone, cyclobenzaprine (except 7.5 mg tablet), metaxalone, methocarbamol, Robaxin (methocarbamol), and Skelaxin (metaxalone).
minocycline ext-rel oral extended-release tablet	Anti-Infectives/ Antibacterials/ Tetracyclines	Preferred include doxycycline hyclate 20 mg, doxycycline hyclate capsule, minocycline, tetracycline, and Vibramycin (doxycycline hyclate capsule).
Mondoxyme NL (doxycycline monohydrate) oral capsule	Anti-Infectives/ Antibacterials/ Tetracyclines	Preferred options include doxycycline hyclate 20 mg, doxycycline hyclate capsule, minocycline, tetracycline, and Vibramycin (doxycycline hyclate capsule).
naproxen-esomeprazole oral delayed-release tablet	Analgesics/ NSAIDs, Combinations	Preferred options include diclofenac sodium delayed-rel, diflunisal, etodolac, ibuprofen, meloxicam, nabumetone, naproxen sodium, naproxen sodium tabs, naproxen tabs, oxaprozin, sulindac, Advil (ibuprofen), or Aleve (naproxen sodium) WITH esomeprazole delayed-rel, lansoprazole delayed-rel, omeprazole delayed-rel, pantoprazole delayed-rel, Dexilant (dexlansoprazole delayed-rel), or Prilosec (omeprazole delayed-rel).
Okebo (doxycycline monohydrate) oral capsule	Anti-Infectives/ Antibacterials/ Tetracyclines	Preferred options include doxycycline hyclate 20 mg, doxycycline hyclate capsule, minocycline, tetracycline, and Vibramycin (doxycycline hyclate capsule).
orphenadrine-aspirin-caffeine oral tablet	Central Nervous System/ Musculoskeletal Therapy Agents	Preferred options include carisoprodol, chlorzoxazone, cyclobenzaprine (except 7.5 mg tablet), metaxalone, methocarbamol, Robaxin (methocarbamol), and Skelaxin (metaxalone).
Orphengesic Forte (orphenadrine-aspirin-caffeine)	Central Nervous System/ Musculoskeletal Therapy Agents	Preferred options include carisoprodol, chlorzoxazone, cyclobenzaprine (except 7.5 mg tablet), metaxalone, methocarbamol, Robaxin (methocarbamol), and Skelaxin (metaxalone).

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Product	Therapeutic Category/ Subcategory	Options/Comments
oral tablet		
posaconazole delayed-rel oral delayed-release tablet	Anti-Infectives/ Antifungals	Preferred options include fluconazole, itraconazole, and Diflucan (fluconazole).
sumatriptan-naproxen sodium oral tablet	Central Nervous System/ Migraine/ Selective Serotonin Agonist / Nonsteroidal Anti-inflammatory Drug (NSAID) Combinations	Preferred options include diclofenac sodium delayed-rel, diflunisal, etodolac, ibuprofen, naproxen sodium, naproxen sodium tabs, naproxen tabs, Advil (ibuprofen), or Aleve (naproxen sodium) WITH eletriptan, naratriptan, rizatriptan, sumatriptan, sumatriptan injection, sumatriptan nasal spray, zolmitriptan, Imitrex (sumatriptan), Maxalt (rizatriptan), Nurtec ODT (rimegepant), Onzetra Xsail (sumatriptan nasal powder), Relpax (eletriptan), Reyvow (lasmiditan), Ubrelvy (ubrogepant), Zembrace SymTouch (sumatriptan injection), Zomig (zolmitriptan), or Zomig Nasal Spray (zolmitriptan).
tramadol (NDC 52817019610 only) oral tablet	Analgesics/ Opioid Analgesics	Preferred options include tramadol (except NDC 52817019610) and tramadol ext-rel.
triamcinolone acetonide aerosol 0.2% topical spray	Topical/ Dermatology/ Corticosteroids/ Medium Potency	Preferred options include betamethasone valerate cream, lotion, ointment 0.1%; desoximetasone cream, ointment 0.05%; fluocinolone acetonide cream, ointment 0.025%; fluticasone propionate cream, lotion 0.05%, ointment 0.005%; hydrocortisone butyrate cream, lotion, ointment, solution 0.1%; hydrocortisone valerate cream, ointment 0.2%; mometasone cream, lotion, ointment 0.1%; triamcinolone acetonide cream, lotion 0.025%; triamcinolone acetonide cream, lotion, ointment 0.1%; and Elocon (mometasone cream, lotion, ointment 0.1%).

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Other

Product	Therapeutic Category/ Subcategory	Options/Comments
BRANDS		
Pataday (olopatadine) ophthalmic solution	Topical/ Ophthalmic/ Antiallergics	Previously-prescription (Rx) products have switched to over-the-counter (OTC) status.
GENERICS		
febuxostat oral tablet	Analgesics/ Gout	Product has a required Boxed Warning, as the U.S. Food and Drug Administration (FDA) has noted an increased risk of death upon comparison to allopurinol. The preferred option is allopurinol.
ranitidine oral capsule, oral syrup, oral tablet	Gastrointestinal/ H2 Receptor Antagonists	Product has been withdrawn from the market due to investigations showing the increasing presence of contaminant N-Nitrosodimethylamine (NDMA) in some ranitidine products. Preferred options include cimetidine, famotidine, Tagamet HB 200 (cimetidine), Pepcid (famotidine), and Pepcid AC (famotidine).

Think twice before prescribing antibiotics for bronchitis

In the face of a COVID-19 pandemic and with the increased use of telemedicine, we must continue to be mindful of the overuse of antibiotics to treat bronchitis.

Bronchitis may or may not require an antibiotic as it can be both viral and bacterial. The most common pattern is for bronchitis to start as a viral infection, but bacterial bronchitis can follow a viral infection of the upper respiratory system, such as cold or flu. In fact, it is possible to have both viral and bacterial bronchitis at the same time.

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Acute bronchitis can come on suddenly as the tubes that carry air to your lungs become inflamed. Acute bronchitis can cause wheezing, chest tightness and shortness of breath. It usually lasts about 3–10 days, but can last as long as three weeks. The cough, however, can linger much longer. Acute bronchitis usually gets better on its own without the need for antibiotics.

The Centers for Disease Control and Prevention (CDC) website states that at least 30 percent of antibiotic courses are prescribed unnecessarily for acute respiratory conditions such as colds, bronchitis and sore throats that are caused by viruses. Additionally, the CDC states that antibiotic use is the most important modifiable driver of antibiotic resistance. Antibiotic-resistant infections lead to higher healthcare costs, poor health outcomes and more toxic treatment. Any time antibiotics are used, they can cause side effects and lead to antibiotic resistance. Antibiotic resistance is one of the most urgent threats to the public's health.

Each year in the United States, at least 2 million people get infected with antibiotic-resistant bacteria. At least 23,000 people die as a result.

Antibiotic stewardship is much needed for clinics and facilities that routinely provide treatment. Antibiotic stewardship is the effort to measure and improve how antibiotics are prescribed and used. Improving antibiotic prescribing involves implementing effective strategies to align them with evidence-based recommendations for diagnosis and management.

Providers should implement at least one policy or practice to improve antibiotic prescribing, assess whether it is working and modify as needed. Providers should also give educational resources to patients on antibiotic prescribing. Patients always should know to take their antibiotics exactly as prescribed.

Regardless of diagnosis, providers always should ask: Does this have an infection that will respond to antibiotics? For example, providers should not prescribe an antibiotic for acute bronchitis because antibiotics are not recommended as treatment. Ultimately, it is best to determine if a case of bronchitis is viral or bacterial before prescribing an antibiotic. In addition, data on antibiotic prescribing is now being tracked and reported in various quality measures.

This article was reprinted from the December 2018 issue of *Providers' News*.

Changes to the Controlling High Blood Pressure HEDIS® Measure reduces the need for medical record reviews

The Controlling High Blood Pressure (CBP) Healthcare Effectiveness Data and Information Set (HEDIS®) measure has been updated to assess patients ages 18-85* who had a diagnosis of hypertension and whose blood pressure was adequately controlled (<140/90) during the last reading of the year. (*Patients turning 86 on December 31, 2020 are excluded.)

Previous CBP HEDIS specifications required medical record reviews to determine if a patient's blood pressure was under control. Now, billing blood pressure Current Procedural Terminology (CPT®) Category II codes on each office visit claim along with a hypertensive condition will determine compliance.

When you add the correct CPT Category II and ICD-10 codes to your claims, medical records will not need to be collected for confirmation. This optimizes time and lessens the need for record keeping for providers.

To learn more about claims coding to reduce medical record reviews and other measure changes, view the CBP tip sheet. [2020 Tip Sheet Controlling High Blood Pressure](#)

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Two star measures support importance of statin therapy for patients with cardiovascular disease and diabetes

The Centers for Disease Control and Prevention estimates that adults with diabetes are 1.7 times more likely to die from cardiovascular disease than adults without diabetes. Additionally, almost two out of five people with diabetes who could benefit from statin therapy to lower their risk of future heart attack, stroke and related deaths were not prescribed one, according to the *Journal of the American College of Cardiology*.

To support the importance of statin therapy, the Centers for Medicare and Medicaid Services include two star measures aimed at the use of statin therapy. Please consider prescribing statins for your patients diagnosed with atherosclerotic cardiovascular disease and diabetes.

These tip sheets give more information about the use of statin therapy:

[Statin Therapy for Patients with Cardiovascular Disease \(SPC\)](#)

[Statin Use in Persons with Diabetes \(SUPD\)](#)

FEP covers smoking cessation tools

The Tobacco Cessation Incentive Program is a benefit for FEP members covered by the Standard Option, Basic Option and FEP Blue Focus. The program includes an online health coach, free tobacco cessation drugs and the chance to earn wellness incentives.

We encourage you to let FEP members know about this program. Have them log on to fepblue.org/tobacco. You can also print and distribute the flyers on pages 33–36. Contact information for the Arkansas Tobacco Prevention and Cessation Program is 501-661-2953.

*Our offices will be closed Friday, July 3,
in observance of Independence Day.*



Health Advantage and BlueAdvantage Administrators of Arkansas are affiliates of the Arkansas Blue Cross and Blue Shield family of companies.

All are independent licensees of the Blue Cross Blue Shield Association.



YOUR PATH TO A SMOKE-FREE FUTURE

YOU CAN DO IT.

If you're reading this, you or someone you know is ready to quit smoking. We know how hard it can be, so we're here to help by providing the right tools and resources to keep you motivated along the way.

The first step is joining the **Tobacco Cessation Incentive Program**. You'll get daily tips and support from the Online Health Coach, free tobacco cessation drugs and may be eligible to earn wellness incentives. Standard Option, Basic Option and FEP Blue Focus members can attend smoking and tobacco cessation classes at no charge when provided by Preferred providers.

This program also covers nicotine dependence from vapes and e-cigarettes as these are not safe alternatives to tobacco. We'll stick with you every step of the way while you work to kick your habit.

Here's how to join:

1. Set a Quit Tobacco goal and then create a Quit Plan with the Online Health Coach¹
2. Get an Rx from your doctor for your eligible tobacco cessation drugs, including OTC products*



TOBACCO CESSATION DRUGS INCLUDE:

Prescription medications like Chantix, Nicotrol and Bupropion and over-the-counter (OTC) products* like Nicorette Gum, NicoDerm CQ Patch and Commit Lozenges.

¹FEP Blue Focus members do not need to complete the Quit Tobacco goal to participate in this program.

*Requires a physician's prescription and must be filled at a Preferred retail pharmacy.

5 TIPS

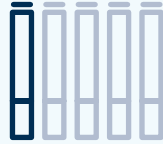
TO STAY CONFIDENT AS YOU QUIT



- 1 **Find other things to do.**
From exercising to spending time with friends, it helps to stay busy. Engage in activities that get your mind off smoking.
- 2 **Avoid common smoking triggers.**
While these may vary for everyone, you'll want to stay away from people and situations that remind you of smoking.
- 3 **Drink plenty of water.**
This not only rinses your mouth and flushes out the toxins, but it also keeps your mouth occupied.
- 4 **Make it public.**
Telling at least one other person helps to hold you accountable. Other people can also provide much-needed support.
- 5 **Celebrate your success one day at a time.**
Don't try to think too far ahead. Instead, reward yourself for each day that you're smoke-free.

U.S. SMOKER STATS

1,300
DEATHS DAILY



1 IN 5 DEATHS
ARE RELATED TO SMOKING

SECONDHAND SMOKE KILLS
40,000
NONSMOKERS PER YEAR



NOW THE GOOD NEWS

SMOKING IS DOWN

10%
SINCE 1997



NEARLY
1.3 MM SMOKERS
QUIT EVERY YEAR

YOU COULD SAVE
\$15,000
PER YEAR*



*Based on smoking one pack a day.

ONCE YOU QUIT SMOKING, YOU CAN LOOK FORWARD TO THESE HEALTH BENEFITS:



Carbon monoxide
in blood stream
drops to normal



Circulation and lung function
improve; heart attack risk
begins to drop

20 MINUTES

12 HOURS

3 DAYS

2 12 WEEKS

Heart rate
and blood
pressure drop



Nicotine has left
your body



Risk of coronary heart disease drops
to that of a nonsmoker

2 5 YEARS

15 YEARS

Risk of mouth, throat, esophagus and
bladder cancer cuts in half; risk of stroke
reduces to that of a nonsmoker



If you're ready to quit smoking, we're here to help. Learn more about the Tobacco Cessation Incentive Program and our Quit with Blue resources at fepblue.org/tobacco.

Sources: The U.S. Department of Health and Human Services. CDC. Smokefree.gov.

This information is not meant to substitute the advice of your doctor or any other healthcare professional. You should speak to your doctor before starting a new diet or exercise routine.

This is a summary of the features of the Blue Cross and Blue Shield Service Benefit Plan. Before making a final decision, please read the Plan's Federal brochures (Standard Option and Basic Option: RI 71-005; FEP Blue Focus: RI 71-017). All benefits are subject to the definitions, limitations and exclusions set forth in the Federal brochures.

The Blue Cross and Blue Shield Service Benefit Plan complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

Para obtener asistencia en español, llame al servicio de atención al cliente al número que aparece en su tarjeta de identificación.

請撥打您ID卡上的客服號碼以尋求中文協助。

TCIPQRG2020



Smoking is an addictive
habit that can
be challenging to kick.

Studies prove you're more likely to successfully quit tobacco if you are being coached. The Arkansas Tobacco Quitline is funded by Tobacco Settlement dollars, so you never have to pay for the service, which includes:

Free unlimited Web coaching

Free personalized phone sessions with a Quit Coach®

Free quit guides

Free Arkansas Diabetes Resources and Educational Materials

Your choice of free medication mailed directly to your home

Smoking directly affects your health, and when you already have one health hurdle, why stack the deck against yourself with more?

One More Reason
TO QUIT

Diabetes and Tobacco Use

1-800-QUIT-NOW

Arkansas Tobacco Prevention and Cessation Program
4815 West Markham, Slot 3
Little Rock, AR 72205
(501) 661-2953

Arkansas Diabetes Prevention and Control Section
Chronic Disease Branch
4815 W. Markham St., Slot 6
Little Rock, AR 72203
(501) 661-2627

Arkansas Tobacco Quitline
1-800-QUIT-NOW
1 800 784 8669
Open seven days a week
7 a.m. – 2 a.m.
Free medications, while supplies last.

Services are available in English, Spanish, Marshallese and more than 160 other languages.



STAMP OUT SMOKING
ARKANSAS DEPARTMENT OF HEALTH

Tobacco Settlement Dollars



STAMP OUT SMOKING
ARKANSAS DEPARTMENT OF HEALTH





What is diabetes?

Diabetes happens when the body stores unhealthy amounts of glucose (sugar) in the blood. The hormone insulin helps remove glucose (sugar) from the bloodstream to cells in the body. Diabetes happens when your body does not get enough insulin, or does not use insulin the way it should. Diabetes can cause serious health complications including heart disease, blindness, kidney failure and lower-extremity amputations.



DIABETES A dangerous combination

- IF YOU ARE A PERSON LIVING WITH DIABETES, YOU CAN PUT YOUR HEALTH AT GREATER RISK BY CHOOSING TO SMOKE OR USE TOBACCO PRODUCTS.
- **SMOKING RAISES BLOOD SUGAR LEVELS AND MAKES IT HARDER TO CONTROL YOUR DIABETES.**
- YOUR MEDICATIONS AND INSULIN SHOTS MAY NOT WORK AS WELL BECAUSE YOU SMOKE.
- **YOU COULD DEVELOP PROBLEMS SUCH AS HIGH BLOOD PRESSURE, A HEART ATTACK AND STROKE.**
- SMOKING DAMAGES BLOOD VESSELS, WHICH CAN INCREASE YOUR CHANCES OF INFECTIONS LIKE FOOT ULCERS.
- **SOME SMOKERS LIVING WITH DIABETES HAVE THEIR TOES, LEGS AND FEET REMOVED (AMPUTATIONS) BECAUSE SMOKING DECREASES BLOOD FLOW TO INFECTED BODY PARTS.**
- SMOKING CAN CAUSE EYE, KIDNEY AND NERVE PROBLEMS.

Make a Plan to Quit

SET YOUR QUIT DAY

When you call the Arkansas Tobacco Quitline, you will be in charge of setting your own quit date. Pick one and mark it on every calendar you own.

GET PREPARED

Quitting can be challenging, but if you remove all temptations and reminders, it will be easier. Throw away cigarettes, lighters and ashtrays. Replace these with healthy snacks like raw vegetables and stress balls to give your hands something to do.

